

CHEMIST & DRUGGIST

The newswweekly for pharmacy

a Benn publication

July 13, 1985

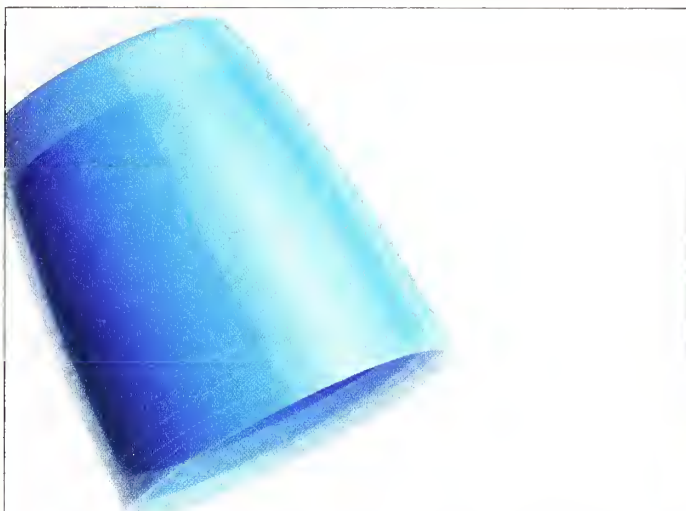
**Contract entry:
DHSS proposals
leaked —
PSGB role
'not secondary'**

**Rationalisation
in practice**

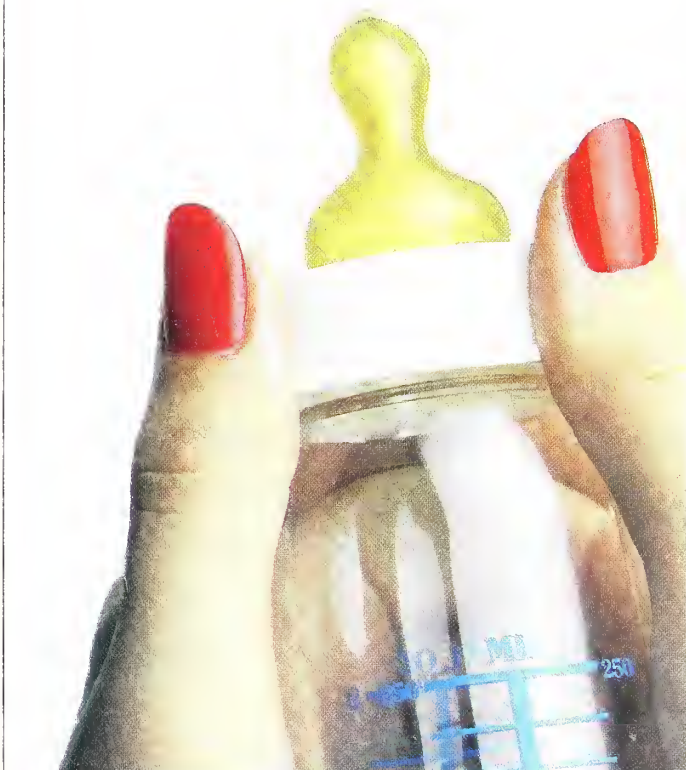
**Drug pricing:
PPRS in the
melting pot**

**Crookes: four
ways to market**

**Beecham to
close down
Monteil UK**



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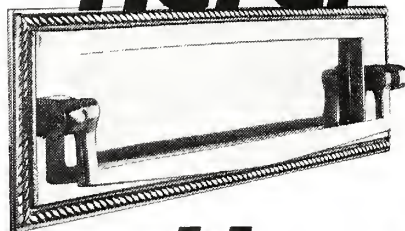
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COMMENT

The Department of Health working paper on the new contract entry guidelines and regulations, published this week, contain few surprises and no sensations.

Most interesting are the criteria for the "minor relocation" of existing contractors that will be allowed by the Family Practitioner Committee without reference to its pharmacy practice subcommittee. If a new shopping centre opens in an existing pharmacy's catchment area, that pharmacy may relocate providing there is no detriment to other contractors. The FPC is expected to produce a "strategy for the development of NHS pharmaceutical services" which will, presumably, take account of local town or County Council redevelopment schemes. Where the pharmacy affected by a major shopping development is an independent, he could well have the automatic right to the pharmacy contract, any application by, say, a large multiple having to go to the PPSC which has to judge whether it is "necessary or desirable." Hopefully it would not allow any additional contract if it was to be of detriment to the relocated pharmacy.

The FPC is responsible for making its strategy clear to the PPSC together with numbers and location of existing pharmacies, numbers of prescriptions, population structure and projections, locations of GP surgeries and transport details. These points, taken together with national guidelines, should make for a more rational location of pharmacies than has so far been possible.

Possible bias of PPSC should be eliminated by their required declaration of any interest in a proposed new pharmacy — not that corruption can ever be eliminated totally. Can seven good men always be true?

The tripartite meeting on Thursday of this week should have proved interesting, if only because the DHSS would appear to be siding with PSNC in its desire to make the Rural Dispensing Committee an additional hurdle for a would-be pharmacy in a controlled locality. The PSGB is against this added burden for a rural contractor. As we have said before, any pharmacy with an "PPSC seal of approval" could well find the height of this second hurdle reduced.

It must be hoped that the traditional bureaucratic burden imposed upon the newly independent FPCs will be expedited in a slightly more responsible manner than that employed by some to interpret Clothier.

If PSNC succeeds in convincing the Department that any new contractors opening up between May 31 and the inception of the new contract should be able to prove a prior financial commitment, then the guidelines and Regulations should be well on the way to providing the community with a rational distribution of pharmacies which is sensible of pharmacists' needs as well.

Guideline negotiations continue as...

The Pharmaceutical Services Negotiating Committee and the Pharmaceutical Society were meeting with DHSS officials on Thursday, after C&D had gone to Press, to discuss the DHSS working paper on entry to the new contract (this page).

The working paper was discussed by PSGB Council, and by PSNC officers last week when they met with the DHSS officials.

PSNC officers will report the outcome of the tri-partite meeting to the full Committee when it meets on July 16-17. The PGSB team will report back to Council members before deciding whether to call an emergency meeting of Council, probably before the end of July.

The prior financial commitment requirement PSNC wants established to close the door on leapfroggers who open up before the new contract is introduced (C&D June 29, p1321), will be discussed at the tri-partite meeting.

Leapfrogging to continue?

Pharmacists Against the Contract says that the new contract proposals will not stop leapfrogging.

"Counsel has informed us that there are areas where the proposals could be challenged by a pharmacist who wishes to obtain NHS contract and is refused one," says PAC chairman Alan Nathan. "In counsel's opinion the agreement between the PSNC and the Government would not stand up in law."

The membership fee has been reduced to £100 per pharmacy. PAC say that any donations above this figure will go into the fighting fund, mainly to meet legal expenses. The membership fee for employee pharmacists remains at £50.

PAC have two new regional organisers: Roger Davies of Mid Glamorgan for Wales, and Richard Searle of Lymington in Hampshire, for the South.

The group have also announced more meetings on their national "whistle stop" tour (full details in **Coming Events** p86).

If the three parties — DHSS, PSGB and PSNC — are then in agreement, the proposals will go to Family Practitioner Committee interests who will study their administration before they are converted into Regulations.

PSNC's chief executive Alan Smith said he was still hopeful the guidelines would prove acceptable to both PSNC and PSGB — if they were not, then the fact that the new contract had been accepted in principle would count for nothing.

He would not comment on the leaked working papers which he said had been available to PSNC and PSGB Council in confidence.

The Pharmaceutical Society have still had no acknowledgement of their letter to the Health Minister expressing concern over the effect of the Regulations on rural pharmacies.

Deputy secretary Raymond Dickinson said that there was no indication in the working paper that the Minister was going to accept the Society's suggestion of exempting rural pharmacies.

The Company Chemists Association is meeting on Friday to discuss the contract.

Key entry points

The DHSS proposes that a Family Practitioner Committee will be able to allow "minor relocation" of existing contracts, taking account of patient needs, but without referral to the seven-man pharmacy practice subcommittee.

"Minor" includes new shopping centres if a new pharmacy there would have no detriment to other contractors. All other contract proposals will go to the PPSC whose members must have declared they have no interest in such an application. However the FPC has the right to refuse an appeal against a decision to turn down a new contract application.

All PPSC decisions will be taken in the light of national guidelines and the FPC's strategy for the local development of NHS pharmaceutical services. The decision will not be based on the pharmacy's likely non-NHS role. A PPSC may combine with the hours of service subcommittee.

Informal approaches about potential new contracts may be made to the FPC.

RDC regulations remain undisturbed.

...DHSS proposal leaked

Details of the Department of Health's proposals for controlling entry to the pharmaceutical list were leaked to C&D this week, and are reproduced in full below.

The document is a working paper only and contains no input from PSNC or the Pharmaceutical Society. A tri-partite meeting with the Department was to take place on Thursday.

Guidance applying to each regulation is in italic:-

1. Regulations will place on FPCs the duty to consider whether the addition of a new pharmacy to the pharmaceutical list is necessary or desirable in order to maintain an adequate standard of NHS pharmaceutical services.

The key issue will be patient need. In determining this the FPC should take account of the number of existing pharmacies, their location and the distances between them by public and private transport, the number of medical practices generating scripts, demography and plans for population growth, FPC's plans for development of medical and pharmaceutical services, complaints, hours of service and scope for amendment of same, plans which would shift shopping patterns. As the FPC's planning activities develop the key document will become the FPC's published plan.

FPC's judgments should be based on service need and not mechanistic formulae but consider whether ratios of patients/pharmacy and/or scripts/pharmacist would be adequate.

2. Regulations will require each FPC to establish a pharmacy practice subcommittee (PPSC) to exercise this duty on its behalf.

Guidance to cover the relationship between the PPSC and other subcommittees of the FPC.

3. The membership of the PSNC will be constituted as follows:

- three persons being practising community pharmacists or pharmaceutical contractors, appointed by the FPC on the nomination of the LPC.
- three persons not being practising community pharmacists or contractors, appointed by and from the FPC.
- a chairman, not being a doctor, a dental practitioner, an ophthalmic optician, a dispensing optician, a practising community pharmacist or a contractor, appointed, after consultation with the LPC, by and from the FPC.

FPC can combine PPSC with hours of service subcommittee if it wishes.

Pharmacist members and deputies will be selected by the FPC from a list of a minimum of seven names provided by the LPC.

4. The FPC will be required to appoint

deputies for the members of the PPSC, three of the deputies being practising community pharmacists or contractors and three of the deputies not being practising community pharmacists or contractors.

In the absence of a member a deputy would be entitled to attend.

5. The members of the PPSC would select a non-pharmacist member to be vice-chairman. In the absence of the chairman, the vice-chairman would take the chair and have the same rights.

6. Quorum arrangements for PPSC:- No business to be transacted unless at least chairman + 1 pharmacist + 1 other member present.

7. Declaration of interest:- No person having a personal or professional interest in the application, or who is associated with any person who has such an interest may take part in any of the proceedings. Define personal interest:- Member or a close relative owns or has shares in company making application; member or close relative owns or has shares in company which would be materially affected by award of contract (Including shopkeepers and related traders).

Member or a close relative employed by applicant or applicant's firm or a contractor materially affected by the application.

No dispensing doctor with patients in area to be serviced by applicant.

Administrative arrangements to discover whether members have an interest before they are appointed so that, where necessary, deputies can serve instead.

8. Decisions of the PPSC shall be decided by vote of the members present, the chairman having no vote. In the case of an equality of votes the chairman shall have the casting vote.

9. A person who wishes to make application to be included in the pharmaceutical list or an existing contractor who wishes to relocate his premises will be required to apply in writing to the local FPC stating the location of the premises from which he proposes to practice (the range of services he intends to provide, and, in the case of relocations, the reason for the move).

A successful applicant must commence contract within six months of a successful application. In controlled areas the six month period would run from the date of either FPC approval or RDC approval, whichever is later.

The FPC will grant approval to minor relocation taking account of the needs to patients. If the FPC considers that the relocation is not minor it will refer application to the PPSC.

Before submitting a formal application the applicant may, if he wishes, make an informal approach to the FPC, though the FPC's response to an informal approach would not be binding. FPC should provide any available information eg. plans, number of previous

applications and their outcome, any FPC policy decisions. Any application must clearly define range of NHS services (eg appliances, oxygen).

Multiple applications would be processed on date received basis.

Definition of minor relocation:- a move which would not involve a change in the population served eg,

1. Expiry of lease/compulsory purchase and acquisition of premises across the road.

2. Reaction to substantial change in external circumstance eg. removal of GPs practice and pharmacy wishes to follow, significant change in shopping habits of pharmacy's catchment population eg development of new shopping centre if no detriment to other contractors.

The contract must be continuous and there must always be only one property.

The aim must be to prevent "leapfrogging" while allowing reasonable service flexibility but avoiding "closed shop"

10. On receipt of an application the PPSC would be required to notify the LPC and existing pharmacist contractors who might be affected should the application be accepted, any FPC whose boundary is within (2km) of the proposed premises, CHCs and LMCs, and invite comments.

"Existing pharmacy contractors" are those in the locality who would reasonably be supposed to be interested whether or not the application is granted.

11. The deadline for submitting comments would be laid down (say, within 30 days of the date of notification to parties).

12. No person who had not expressed an interest at this stage would be entitled to make an appeal at any later stage.

13. The FPC would be required to supply the PPSC with all available relevant information.

This would include the FPC's strategy for the development of services locally and/or other relevant information including numbers and location of existing pharmacies, numbers and source of scripts, population structure and projections, location of GP's surgeries, transport patterns, maps of the area. Site visits could be made and oral evidence taken if necessary.

14. The PPSC would refuse to grant entry to list in all cases where it was of the opinion that a new NHS pharmacy was neither necessary or desirable to maintain an adequate NHS pharmaceutical services.

The PPSC's decision would be taken in the light of national guidelines and the FPC's strategy for the local development of NHS pharmaceutical services. It would not be based on the pharmacy's likely non-NHS role.

15. PPSC decisions must be by objective standards. If a contractor leaves it should not be assumed a vacancy exists that must be filled.

16. The FPC would notify the applicant and existing pharmaceutical contractors materially affected by the application of the PPSC's decision and that the decision would stand unless an appeal was lodged within 14 days of the date of notification of that decision.

No late appeals will be admitted.

17. Applicants would be advised to write to the FPC indicating the grounds on which they wished to appeal and giving a statement of the facts and contentions upon which they intend to rely.

The grounds for appeal might include:

— failure of PPSC to observe agreed procedures;
— signs of new evidence not available to PPSC;
— PPSC's decision would be detrimental to the provision of NHS pharmaceutical services.

18. Frivolous or vexatious appeals or appeals where the grounds are not disclosed would be rejected by the FPC without a hearing.

A definition of 'frivolous' and 'vexatious' will be given for guidance of the FPC.

19. FPCs would be responsible for deciding whether the appeal should be heard, and, for convening an appeal panel.

20. FPCs would be required to maintain a list of members who could sit on appeal panels convened by neighbouring FPC's. The lists would be categorised according to the categories of PPSC membership but would not be restricted to members of the FPC's PPSC.

21. It would be convened by, but independent of the FPC.

The appeal panel would be serviced by the home FPC.

22. The appeal panel would be drawn from the lists maintained by neighbouring FPCs. Members of an FPC consulted under 10. and nominees of the associated LPC would be excluded from sitting on the appeal panel.

Define neighbouring. FPCs to group themselves into consortia/regions?

23. The membership of the appeal panel will be constituted as the PPSC.

24. Appeal panel to re-hear application in full?

25. No person having a personal or (see 7) professional interest in the appeal may take part in the appeal proceedings.

26. The decision of the appeal panel would be final and binding on the FPC.

Appeals would be heard within (2 months) of an appeal being lodged. The FPC to decide upon all aspects of tribunal hearing. (eg type of evidence, number of witnesses, style and location of hearing).

27. The appeal panel would notify the FPC of its decision. The FPC would be responsible for notifying the applicant and those consulted under (10). Entry to the list would be conditional on the contractor taking up practice within (6 months). A longer period to be allowed in a controlled area.

28. A successful applicant would be prohibited from assigning his right to contract before taking up practice in the new premises.

29. In a designated rural area the FPC's approval of entry in the list would be required before application could be made to the RDC.

RDC regulations to remain undisturbed.

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NPA BOARD

Shortages bring pricing delays

Current difficulties and delays at the pricing bureaux are due almost entirely to staff shortages and a high workload caused by the HD endorsement scheme, the restricted prescribing list and Government cutbacks.

This explanation was given to a meeting of the National Pharmaceutical Association Board of Management on June 25 by Lewis Priest, a member of the Prescription Pricing Authority. Most contractors were receiving a 100 per cent advance payment. Roy Jones, from Mid-Glamorgan, asked whether the 100 per cent would be indexed to the rate of inflation to avoid underpayments as had occurred when pricing had last been in arrears. It was pointed out that inflation was at a much lower level than it had been on the previous occasion and sudden monthly increases in the rate of inflation would be most unlikely.

New contract Concern was expressed about the surge of applications to register pharmacies before the new limitation arrangements came into effect. David Sharpe, Board member from London and PSNC chairman, said he hoped to be able to persuade the Department of Health to apply limitation to any contractor who had not been genuinely financially committed by the end of May to opening a pharmacy and whose pharmacy was not open for business under contract to the NHS by the end of September. He said that a meeting was shortly to be held with the Department to discuss this.

Mr Bob Worby, Board member from London, pointed out that contractors who experienced a sudden fall in prescription numbers might find it difficult to decide to relinquish their contract in time to give notice by the suggested deadline. He hoped that details such as this would be borne in mind during the negotiations.

The Board welcomed the PSNC decision on professional indemnity and it was pointed out that there would be no reason why it should not be a professional and contractual requirement.

EEC matters Will Kneale, NPA EEC liaison secretary, reported on the EEC Pharmacy Group General assembly held in Stratford-upon-Avon, June 17-19.

It was noted that when Spain and Greece became full members of the EEC in January 1986, the total number of pharmacies in the enlarged European Community would be 92,000, serving a population of 320,000,000 people.

The Greek delegation was still opposed to the draft directives concerning the mutual recognition of diplomas and the free movement of pharmacists. Continuing pressure would be brought to bear on the Greek Government and on Greek pharmacists to accept mutual recognition and right of establishment before the end of the year.

Original pack dispensing Peter Taylor, chairman, and Tim Astill, director, had represented the NPA at an ABPI meeting to discuss OP dispensing. Debate had centered around whether the pack size should be based on a specific number of dosage units or whether it should be based on a period of treatment. It was agreed that antibiotics were a special case although it was recognised the doctors would disagree about the ideal length of a course.

Dispensing technicians training course The Board decided to advise members that students being enrolled on the course should have had one year's work experience in retail pharmacy. Some 16 year olds who had gone straight from school onto the course had experienced difficulties, as had 17 year olds with little retail pharmacy experience and limited academic qualifications.

Youth training scheme From April 1986 all YTS schemes would have to offer a two year training programme of some 20-26 weeks leading to a vocational qualification.

The training department considered that there could be problems in developing training material and courses for a pharmacy sales assistant that would lead to a vocational qualification, particularly since the NPA staff training course certificate was fully incorporated into the one year YTS scheme. It was thought that capable students could perhaps be admitted to the first year of the dispensing technicians correspondence course and this could provide a major proportion of the second year's training programme. As a two-year YTS appeared to require higher calibre candidates, the NPA would lobby for the continuation of one year YTS.

Sunday trading The NPA is strongly against a Sunday trading "free-for-all." A poster is to be sent to all members for display in their pharmacies, and they are to be encouraged to write to their MPs individually.

Press and publicity The latest offer of the NPA feature "Ask your chemist" had been quite successful with almost a 25 per cent positive response from the 1,200 newspapers mailed.

Price calculator An edition with improved layout will be ready by the end of July.

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PSNC needs O₂ agents urgently

PSNC is to tender after all for the new concentrator service to be introduced on December 1.

The DHSS says it can employ pharmaceutical contractors as sub-agents rather than as sub-contractors (last week p5) to supply patients who use more than 20 cylinders a month.

Contractors who want to be sub-agents must contact PSNC at Aylesbury by July 22 — the number interested will affect the size of the bid.

Amoxil ex RGW?

Packs of Amoxil 250g overprinted RGW in red are still being offered up and down the country, in spite of an advertisement in the Society's journal that anyone supplying the capsules could be in breach of Beecham patent trade marks.

Packs were being offered to wholesalers this week at £42 trade, about half the standard UK price. Estimates of the number of packs on the market vary from around 20,000 to 46,000.

Beecham are being very coy about the origins of the capsules, and would give no details of the supplier as they say they are considering taking legal proceedings.

"The importers and UK distributors of this material are operating without our authority. They are therefore likely to be infringing UK industrial property rights which effectively enables us to market exclusively or licence Amoxil for use in this country," a company spokesman said.

Sources say the capsules are part of an export order that never left UK shores.

Express overdose for Winthrop

Sterling Winthrop have complained to the Daily Express about a report of an overdose case involving paracetamol.

The report implied that a young girl died after taking five Panadol tablets, but left out a "vital passage," according to Sterling Winthrop, who have asked the newspaper to run a correction.

Death after taking so few tablets is "beyond any of our experience with paracetamol" a spokesman from Sterling

Chemist & Druggist 13 July 1985

Contract defeat?

I have read, as will most of you, the letter last week from Alan Nathan, chairman of Pharmacists Against the Contract, claiming his association has become a truly representative and national organisation for rank and file pharmacists.

But more serious than the claim that acceptance of the contract in principle somehow represents a resounding defeat for PSNC, is the suggestion that delegates refused to accept the proposals in their original form, and that PSNC was being forced to go back to renegotiate the contract!

By any reading of the extensive reports on the proposals and the debate this is not so. The proposition put to our delegates was they should approve, in principle, the limitation of contract, subject to the terms already made clear, and subject to further clarification. Which means we, or PSNC on our behalf, have genuinely to be satisfied about terms and safeguards. How can anyone see this perfectly straightforward proposition by PSNC as a defeat? The delegates at the LPC conference did not appear to send PSNC scuttling back to the negotiating table, tails between their legs.

There is another point too. None of us, especially people like me who hover around the minimum number of scripts monthly, like to see other pharmacists who are doing fewer scripts being deprived of the boosted earnings they enjoyed under the Basic Practice Allowance conditions. But, irrespective of what the pharmacist does all day in these small dispensing businesses, a contracting authority cannot be expected to pay a hefty £3,000 pa front-loading to support 400-500 subcontractors who are essentially redundant when measured against the service available in any given area, just because they happen to be qualified pharmacists. We have been living in an environment in which we assumed divine right because of our qualifications to open or operate a pharmacy and demand an NHS contract.

PSNC hasn't done too badly at all in persuading the Government it would be worth their while to control the number of contractors, to get them to pay

Winthrop told *C&D*. The "vital passage" left out was a comment from the coroner that "although there was no witness able to give the exact number of tablets taken, there was what he called a surprisingly high blood level of paracetamol."

The *Express* story, which featured on the front page and three columns on page two, quotes Coroner Sir Montague Levine

compensation to those who surrender uneconomic contracts and to acknowledge, ultimately, the wider value of the pharmaceutical services we offer.

Straight up?

Mr Malcolm Town tells us parallel importing is legitimate and on the up and up. Even assuming the products carry the same makers' support and liability in this country as in their place of origin, and the liability will stand in a court of law here — the trouble is that the NHS contract is a cost-plus one, ie they reckon to pay us a set or negotiated margin on what the product costs us. It is clear from the reasonably satisfactory arrangements which have run for the last six months or so that the Government is not going to blow a fuse if we are able to pick up perhaps 3-4 per cent extra profit by hunting around suppliers, or buying seasonal bonuses. But it draws the line, sharply, at substantially greater margins and then asks for true cost. Since we have not always been unduly forthcoming, it assesses this as 20 per cent of list. Even that is not too swingeing, if what I am told is correct. Why did someone have to put a spanner in the works by taking the DHSS to court? This action could guarantee all of us long term pain and anguish before too many months elapse. . .

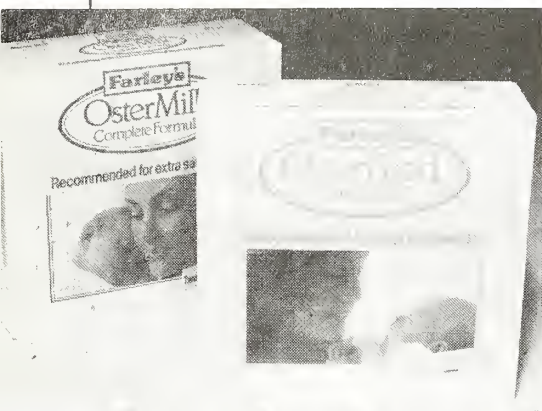
Sweet fragrance

I've got a new swagman. And he is good. Last week I was able to top up on most of the better French house perfumes at regular trade prices — without premiums. No point in going into names and sizes, but today I have the best range ever of fresh stock. From conversation with the firm, it is clear the makers are now supporting these sales by various means, so as to provide what is effectively a wholesale service.

I have, of course, long since booted out my agencies because they were far too stropky for their own and my good, with the exception of the more realistic darlings like Lenthéric and Yardley, Max Factor etc. They had the wit to look at the wider market and take heed of the selling methods of people like Avon.

as saying that the drug is safe in the correct dosage. "The drug could prove fatal if 12 to 16 tablets were taken at once."

Sterling Winthrop had plans last year to launch a preparation which combined paracetamol with methionine as an antidote, called Panaton. The product was one month from launch when the Fowler blacklist announcement came.



Clear message from Ostermilk

Farley Health Products are relaunching their Ostermilk range in packs designed to tell mothers more clearly what each of the three variants is for.

Napp move from gel to liquid

Napp Laboratories have launched Carylderm liquid shampoo (100ml, £1.90) which replaces the Carylderm gel shampoo, now discontinued.

The product is a new formulation of carbaryl shampoo, say Napp, designed to match the consumer trend towards liquid shampoos away from gels.

It has a new fragrance and comes with an instruction leaflet incorporating information on headlice. *Napp Laboratories, Cambridge Science Park, Milton Road, Cambridge CB4 4BH.*

Robbins take on Dry Sheet

Dry Sheet, previously sold by Feeder Products (see *C&D* April 6), has been taken over by Robbins Medical Supplies and renamed Robbins Dry Sheet.

The disposable draw sheets are not only useful as an incontinence product but, say Robbins, can be used for protecting car seats from pets, floors from children in high chairs and may also be useful for women who have heavy periods.

Made from an absorbent non-woven fabric with a polythene backing the sheets come in packs of five (£2.99) available from *Farillon Ltd, Bryant Avenue, Romford, Essex RM3 0PJ.*

Foot of the page

Cuxson Gerrard are advertising Carnation callous caps in the women's Press during September.

The message is conveyed by an on-pack flash.

Mixing instructions have also been updated and are now "clearer and more pictorial," say Farley Health.

Osterfeed and Ostermilk complete formula now come in 900g packs (£3.39) as well as the existing 450g pack.

Research shows that 69 per cent of mothers buy at least 900g of baby milk on each shopping trip, says the company, and the convenience and economy of larger packs has contributed significantly to the growth of the £53m market.

Details of the relaunch are to appear in key health care journals and baby annuals, say *Farley Health Products Ltd, Torr Lane, Plymouth PL3 5UA.*

The campaign will feature in *Family Circle, Good Housekeeping, Home and Country, Women and Homes and Woman's Realm* and, if successful, will be extended next year.

A team of eight volunteers, all sporting "Carnation treat feet" T shirts, was sponsored by the company recently to push wheelchair bound Daniel Gibbons, around a 13.1 mile half marathon course. They finished in just under three hours and the company awarded medals to each member and a trophy to Mr Gibbons. A donation was given to the fund set up for physically and mentally handicapped children in the Dudley area, and an emergency treatment tent was provided by Cuxson, Gerrard for staff dealing with runners' sore feet.

The company also is sponsoring a team in a full marathon held in Sandwell. *Cuxson Gerrard & Co (Dressings) Ltd, 26 Fountain Lane, Oldbury, Warley, West Midlands B69 3BB.*

Radio push from Abbott

Abbott Laboratories are advertising two Pharmacy only products on local radio and in the national Press until August.

Selsun radio advertisements will be heard by 33 per cent an average of eight times, says Abbott. National Press advertisements for the product will be seen by 61 per cent of men and 59 per cent of women in social groups C1 and C2 aged 25 to 44, says the company.

Radio commercials for Murine run in London and the North West until the end of July. Press advertisements appear in the *Daily Mail* and *Sunday People* until the beginning of August, say *Abbott Laboratories Ltd, Queenborough, Kent ME11 5EL.*

RBC — 3 as 2

For the month of July only, orders for the three dozen parcel of RBC cream will be invoiced as two dozen, say *Rybar Laboratories Ltd, 29 Hill Avenue, Amersham, Bucks HP6 5BX.*

Anadin extra

Anadin extra is now available in a 48 tablet pack (£2.05). Details of introductory bonus on the Pharmacy only pack are available from company representatives.

The product is being backed by a major television advertising campaign. *International Chemical Co Ltd., Chenies Street, London WC1E 7ET.*

SCRIPT SPECIALITIES

Diamorphine hydrochloride injection 500mg: From July 15 diamorphine hydrochloride injection from Evans will be available in a 500mg in 2ml strength (5, £57.29 trade). The injection comes in tamper evident packs of five ampoules.

It can be used for sub-cutaneous, intramuscular or intravenous injection, say Evans.

The injection has been introduced in response to requests from hospitals and the Department of Health. With the increased use of "syringe drivers" to give diamorphine on a continuous parenteral basis, the 500mg ampoule will minimise the possibility of mistakes in loading the syringe driver, extra glass contamination and waste of nursing time, say *Evans Medical Ltd, The Old Post House, London End, Beaconsfield, Bucks HP9 2JH.*

Lederfen identification: from July 15 Lederfen tablets and capsules will have "Lederfen" printed on them to help with identification, say *Lederle Laboratories, division of Cyanamid of Great Britain Ltd, Fareham Road, Gosport, Hampshire PO13 0AS.*

Jelonet roll: Jelonet now comes in roll form, intended for use in burns units in hospital.

The 15cm x 2m dressing (12, £16.56 trade) is wound onto plastic core and has a handle to ensure ease of use and good antiseptic technique, say Smith & Nephew.

The product is not on the Drug Tariff and will be distributed to hospitals. *Smith & Nephew Ltd, PO Box 81, Hessle Road, Hull HU3 2BN.*

Save 50p with Gibbs' £2m spend

Elida Gibbs are running a £2m promotion campaign in support of their Harmony cream colourant and colour foam.

A women's Press campaign runs until the end of the year with some magazines featuring a 50p discount offer until the end of October. In return for sending in a completed coupon and a logo cut from any semi-permanent or wash-in wash-out colour pack, the consumer receives the discount on the next purchase of Harmony colour foam.

A point-of-sale promotion uses leaflets to invite customers to send in a proof of purchase from the colour foam in exchange for a 50p coin. *Elida Gibbs Ltd, PO Box 1DY, Portman Square, London W1A 1DY.*

The fashion Factor

Max Factor are to join forces with fashion company L'Ultima to give women a co-ordinated beauty and clothes programme.

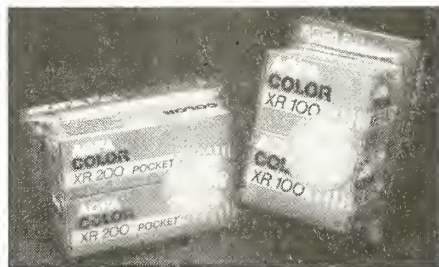
Autumn/Winter garments will be in the shops from mid-August and attached to each item will be a £1 off Colorfast cosmetic voucher. A fashion fortnight in September will feature both companies in shows in major stores nationwide. Colorfast will feature a cowl hood by L'Ultima as a pre-Christmas gift with purchase promotion.

Colours in the L'Ultima collection match those in the Colorfast Cafe Society range for Autumn, with shades such as French claret, sapphire, and champagne rose. *Max Factor Ltd, PO Box 3, Frances Avenue, West Howe, Bournemouth.*

Pampered to new lengths

Stuart Edgar have introduced four new products to expand the Pampered toiletries range into the skin care market. Packaged in blue and pink colour co-ordinated 250ml bottles, the new products are a cleansing milk, skin freshener, hand and body lotion and a splash-on every day cologne. The cologne has a fragrance designed to suit both sexes. The new products retail at £0.69 each. *Stuart Edgar Ltd, Etherstone Mill, Warrington Road, Blazebury, Warrington.*

Chemist & Druggist 13 July 1985



Agfa are offering free cassette tapes with twin packs of XR100 and XR200 film. Agfacolour XR100 135-24 and XR200 110-24 packs (both around £5) are included in the offer. *Agfa Gevaert Ltd, 27 Great West Road, Brentford, Middlesex TW8 9AX.*

Faith enlist royal aid

Faith products have introduced two new variants to their hair care range: aloe vera shampoo and a seaweed conditioner to complement the seaweed shampoo.

Both are sold in tens and in 130ml bottles, and retail at £0.95 and £1.11 respectively.

In August the company will also extend the vegetable soaps range with Mary Queen of Scots soap, lilac scented and described as the "beauty soap of Marie Stuart," and Bonnie Prince Charlie soap with oil of pine fragrance (£5.25 for 10 trade). *Faith Products Ltd, 52 Albion Road, Edinburgh EH7 5QZ.*

Rich and Famous in the Autumn

Rich and Famous is the name given to Revlon's Autumn collection of face and nail colours. They include the following new shades: Rich and Famous berry, royal jade and star sapphire powder eyeshadows, gold kohl eyeliner pencil, wine with everything and frosty plum in blusher and imperial berry and radiant flame for lips and nails.

Ultima II are calling their Autumn collection Seville and including the eye shadow Seville violet, and Seville sun and Seville rose for lips and nails. *Revlon International Corporation, 86 Brook Street, London W1Y 2BA.*

Rocket tinter

Rand Rocket have introduced a tinting brush to their Rainbow range. The tinter, which comes in red, yellow and blue, retails at £0.23 and £0.67.

The Rainbow range now includes brown as a colour for the hairflo, vented and radial vented brushes. *Rand Rocket Ltd, ABCare House, Walsworth Road, Hitchin, Herts SG4 9SX.*

Krups go for floating votes

The popularity of floating hood hairdryers in Germany has convinced Krups to introduce a model for the British market.

The Quickair (£16.95) weighs 1lb 6oz, and comes with adjustable neck strap and 11ft of flex. It offers three heat settings, including a cooling-off stage, which the company says will help create long-lasting curls.

Krups say the UK market for rigid hood dryers has fallen to about 70,000 units a year, but point out that floating hood models have sales of 400,000 in Germany. *Krups (UK) Ltd, Motherwell Way, West Thurrock, Grays, Essex RM16 1DX.*

New Waves set for splash

New Waves is Elizabeth Arden's Autumn collection of colours, which, says the company, has its emphasis on the eyes. Shades include lightning, pulsating pink and high voltage violet in eye powder (£4.95 to £6.25) and mascara (£5.25); magenta, bronzefire and starfire for lips (£3.95), video violet and topaz for glass (£3.50) and soft focus pink, mauve and bronze for nails (£3.25). *Elizabeth Arden Ltd, 13 Hanover Square, London W1R 0PA.*



Pharmacist Tom Lean from Jedburgh (right) is presented with an Acorn home computer and software, the first prize in a Numark draw, held at their convention in Palma. National accounts manager Gary Miller made the presentation, and the prize was donated by Crookes Products

Summer contest from Sterling

Sterling Health are running a Summer competition on their Wet Ones moist wipes.

Consumers must send in proof of purchase tokens, featured on a special promotional label, on 50 and 70 packs, in order to enter. An instamatic camera is offered to each entrant placing the qualities of a successful holiday in the correct order. Also carried on the promotion label are competition details and entry instructions.

Promotional in-store material such as shelf strips and shelf edgers will give prominence in the offer, which will also feature in the women's Press. *Sterling Health, 1 Onslow Street, Guildford, Surrey GU1 4YS.*

Carmen with a TV blow

House of Carmen are backing their Blow 'n' shape and Blow 'n' curl hot air stylers with a £1m plus television campaign in London.

The 30 second commercial shows close-up sequences of a mystery woman, who is then revealed to be Rosalyn Landor of the CATS Eyes series.

Another television burst has been planned in other regions during the Autumn, say *House of Carmen, Carmen House, Deer Park Road, London SW19 3UX.*

Empathy TV

Johnson and Johnson are boosting their Empathy shampoo with a £900,000 national television advertising campaign.

The programme starts on July 29 and runs throughout August, featuring the 30 second "no age limit" commercial. *Johnson & Johnson Ltd, Brunel Way, Slough, Berks SL1 4EA.*

Shock offer

Wella are offering "20 per cent free" on their Shockwaves super firm gel and hard rock hairspray. The gel is being offered at 150ml for the price of 125ml and the hairspray at 300ml for the price of 250ml (around £1.13 and £1.65 respectively). *Wella Great Britain, Wella Road, Basingstoke, Hampshire.*



Everyone wants an advertising campaign to run and run. J. Pickles & Sons, the Harrogate-based manufacturing chemists, have found the answer with this two-year-old gelding — Snowfire Chap.

"Everyone can have some fun with a horse race," says managing director Simon Horner. "The first time Snowfire Chap is running with a chance, I have promised the workforce half a day at the races." Pictured with the gelding are Pickles directors Jeff Mellor, Simon Horner and Zillah Horner, trainer Harry Wharton and jockey Stuart Turner

Fems gem

Kimberly-Clark are running a half-price offer on 10s and 20s cartons of Kotex Fems. The offer runs until the end of August. *Kimberly-Clark Ltd, Larkfield, Nr Maidstone, Kent.*

Davina's starter for £30

Davina Health products have introduced a series of starter packs for their speciality powders, vitamins and minerals.

The packs are available for around £30 and, says the company, allow retailers to try different product ranges without the commitment of a large order. The pack offers retailers a 35 per cent margin, say *Davina Health Products, 1 Cambridge Court, Cambridge Street, Sheffield.*

Ysatis — seven with one blow

Givenchy are launching a range of body care products based on the Ysatis fragrance, following the introduction of the perfume a year ago.

The seven products, packaged in white with the Ysatis trim, will be on-shelf from September 2. The range comprises: perfumed beauty veil (200ml, £14) — a non-greasy emulsion; beauty oil spray (75ml, £13); cream (200ml, £21.50); bath and shower gel (200ml, £13); soap (100g, £5); dusting powder (200g, £21.50) and deodorant (150ml, £9).

POS material includes a showcard, tester holder and window display unit, with counter leaflet and prestige brochure. *Parfums Givenchy Ltd, Riverdene Industrial Estate, Molesey Road, Hersham, Walton-on-Thames, Surrey KT12 4RG.*

Smooth as silk

The first of a new range of products is being introduced by La Chasse Cosmetique, a wholly owned subsidiary of Original Additions. Body Silk body lotion is being backed by a £100,000 campaign with full page colour advertisements in *Vogue, Company* and *Cosmopolitan* from August to December.

The lotion retails at £2.99 (350ml) and £0.49 (30ml trial size). Merchandisers depicting the advertisement are available in regular (12 x 350ml) and trial (24 x 30ml) sizes. *Original Additions (Beauty Products) Ltd, 12 Short Road, Chiswick, London W4 2QU.*

ON TV NEXT WEEK

GTV Grampian	U Ulster	STV Scotland
B Border	G Granada	Central
C Central	A Anglia	Y Yorkshire
CTV Channel Islands	TSW South West	HTV Wales & West
LWT London Weekend	TTV Thames Television	TVS South
C4 Channel 4	Bt TV-am	TT Tyne Tees

Aller-eze:	All areas except BT
Altacite Plus:	C, A, HTV, C4
Anadin:	U, BTV, Y, A, HTV, CTV, TSW, TT, (ITV, C4 and Bt in specified areas)
Beecham Slazenger sport range:	All areas
Braun Independent:	All except TSW
Bristol Myers Mum:	All areas
Caladryl:	TVS
Calgon:	A, TVS, TTV
Cidal:	G, C, TTV, C4
Clairol Loving Care:	All areas
Cream Silk:	All areas

Cymalon:	Bt
Imperial Leather:	All areas
Jaap's health salts:	BTV, TTV, C4 (TT, BTV)
Kenwood Spring:	Bt
Kodak films:	All areas
Lady Grecian:	GTV, STV, BTV, G, Y, C, A, HTV, TSW, TVS, LWT, TT, C4
Linco Beer shampoo:	All areas
Listerine:	C4 (LWT, TTV)
Mennen Speedstick:	All areas
Migralift:	Y, C4
Optrex:	All areas
Photoplus Labs:	Y
Poly Foam:	All areas
Pond's Perfect Colour cosmetics:	All areas
Sensodyne toothpaste:	All areas
Signal toothpaste:	C, TTV
Vaseline petroleum jelly:	Bt
Veganin:	C4 (Y)
Wisdom toothbrushes:	All areas
Anne French:	Bt
Velvet toilet tissue:	GTV, BTV, Y, TT

LABITON[®] GOES OTC

Naturally!



After many years as a prescription favourite Labiton is now available in a new OTC pack.

The new 200 ml bottle will be sold exclusively through retail pharmacies and has been designed to brighten your shelves and to empty them quickly!

The Labiton Kola and Vitamin B₁ formula is tried and trusted and

pleasant to taste. It contains natural extract of Kola Nuts and caffeine to overcome tiredness and listlessness plus Vitamin B₁ to make up deficiency resulting from recent illness or anorexia.

When your customers buy Labiton Kola Tonic we expect them to come back for more.

Labiton is a trademark

Give depressed profits a tonic

Take advantage of the bonus period to boost profits. Order immediately by returning the FREEPOST coupon.

Orders will receive discount at 14/Doz plus normal wholesale terms. Please order in multiples of 1 Doz

Order as many times as you like until the Bonus period ends 31 July 1985.

Labiton 200 ml trade price 91p retail price £1.57.

Orders received during the bonus period will be supported by attractive in-store display material.

Please tick wholesaler of choice and write in branch

☐ Mocorthys Ltd

☐ Unichem Ltd

☐ Vestric Ltd/AAH

☐ Other Wholesaler

Please arrange for me to receive the following Labiton bonus order:

_____ dozen (Please fill in quantity)

Name _____

Address _____



Return to LAB Ltd., FREEPOST, 91 Amhurst Park, London N16 5BR.



Make sure your shelf fillers are up to strength in your homebrew section.

Unican will be keeping them busy.

We're launching two brand new ranges, extending two top-selling ranges and updating an old favourite.

You won't find these products gathering dust either.

Take our new Country Reserve range. Country wines are a fast-growing sector and our research shows that consumers will go for our Peach, Blackberry, Elderflower

and Elderberry in a really big way.

Sales are also rising sharply at the budget end of the market. Stock our new highly drinkable House Reserve range and you'll get your share.

House Reserve comes in one gallon and five gallon packs, with a choice of Full Bodied Dry Red, Medium White, Sweet White and Rosé.

To maintain the interest of the more sophisticated wine maker, we're introducing Rosé Vermouth and Sweet



Announcing full employment for shelf fillers.

White Vermouth under our prestigious Special Reserve Label.

Following last year's spectacular 30% growth in sales, we're giving extra body to the Unican beer range with our new Irish Style Extra Stout.

And you'll find our best-selling Three Week Wines will sell even faster with their stylish new packaging.

Just to keep your shelf fillers occupied, we're building

demand with high

impact advertising in such high profile publications as The Sunday Times, The Observer, You, Sunday and Radio Times.

But what else would you expect from the first name in homebrew wines and beers?

UNICAN FOODS LTD., UNICAN HOUSE, CENTRAL TRADING ESTATE, BATH ROAD, BRISTOL BS4 3EH. TEL: (0272) 712281.





Vichy extend skin range

Three new products are being added to the Vichy skincare range — dermatological cleansing bar (100g, £2.49), early wrinkle cream (40ml, £5.80) and wrinkle treatment and firming creams (40ml, £7.85).

The natural wheatgerm cleansing bar is, say Vichy, rich in amino-acids, lecithin, vitamins and minerals and has a pH of 6.5. It forms a rich lather which is easy to rinse away. "Suitable for frequent use on the face and body, the bar's perfume will appeal to men and women," says Vichy's head pharmacist Diane Miles. Introduced on the platform of their

"biggest launch for ageing skin", early wrinkle cream and wrinkle treatment and firming cream will be supported by "extensive" advertising in the women's Press at the end of the year and early 1986.

Early wrinkle cream is designed for those in their mid-twenties with the first sign of wrinkles. Enriched with biological elements, the cream helps to stimulate cellular activity and improve respiration of the skin, say Vichy. In particular the polypeptidic derivative energises the cells and improves their oxygen uptake. The cream is said to delay the formation of further wrinkles by preventing skin drying and contains UVA and UVB filters.

While early wrinkle cream is designed for 25 to 35 year olds, wrinkle treatment and firming cream is suitable for 35 to 45 year old women. Its rich, non-oily texture means that it can be used both in the morning, under make-up or at night, say Vichy UK Ltd, Ashville Trading Estate, Nuffield Way, Abingdon, Oxon OX14 1TJ.

Kleenex travel the air waves

A £250,000 radio campaign is being mounted by Kimberley-Clark in support of Kleenex travel tissues.

Three 40-second commercials are to feature on all commercial stations for four weeks from mid-July. They highlight convenience for travellers, and use the theme "when you are out and about and you can't take the box, take Kleenex travel tissues". Kimberley-Clark Ltd, Larkfield, Nr Maidstone, Kent.

Primrose path

Evening primrose oil is a new addition to the Spirit of Health ranges.

Each capsule provides 250mg evening primrose oil and 5iu of vitamin E. The recommended dose is two daily (50, £3.75). Addis Ltd, Brushworks, Hertford.

New Vanderbilt

Vanderbilt is a new perfume being launched by Gloria Vanderbilt and representing, say L'Oreal, "femininity, sophistication and richness."

The fragrance is described by the company as "fresh, floral and fruity," combines jasmine, tuberose and mimosa with lemon and orange flowers. The collection consists of parfum (£15 to £40)

and eau de toilette (30ml spray, £8.25; 50ml, £10.75 and 100ml, £15.95). Each product features the Vanderbilt swan logo and the perfume itself is presented in a smooth, slim round bottle with a square stopper.

A major television and Press advertising campaign will back the product in October, using the swan image and the catch line "Let it release the splendour of you." L'Oreal Cosmetique, 30 Kensington Church Street, London W8 4HA.

Beecham on solid ground

Beecham are adding a solid stick form to the Body Mist 2 anti-perspirant deodorant collection, representing the third phase of the range's update package for 1985.

The 52g solid stick will be available in wild fresh and dawn fresh and is expected to retail at a premium price of £1.39. A £1m national television campaign starting in the Autumn will back the product.

"These two variants will be the first in the UK specially made for women, and will reinforce Body Mist 2's reputation as the top selling brand for women," says Beecham Toiletries' general manager, Mike Fensome. The launch of the solid follows the introduction of the reformulated aerosol variants in January and the addition of the unperfumed roll-on variant in April. Beecham Proprietaries

A Lauder shade of pale

Estee Lauder have introduced a new shade to their Sportwear tinted day cream range.

The new shade is porcelain, which, says the company, is particularly appropriate for women with pale complexions, or who would like to create that effect to complement Winter make-up. Estee Lauder Cosmetics Ltd, 71 Grosvenor Street, London W1X 0BH.

Burnished...

Mary Quant's colour range for Autumn is made up of burnished colours with a molten metallic texture.

Eye shadow, mascara, lip shades, blusher and nail polish will feature colours such as purple harem, silver smudge and pink teaser. Gala Cosmetics & Fragrances Ltd, PO Box 3, Frances Avenue, West Howe, Bournemouth KT6 7LU.

...and bright

Colour it bright is the name of the Maxi collection for Autumn, out in August.

Five products including powder eyeshadow and brush-on-blush will feature shades such as white lightning, electric purple and infra-red. Max Factor Ltd, PO Box 3, Frances Avenue, West Howe, Bournemouth BH11 8PL.

Toiletries, Beecham House, Great West Road, Brentford, Middlesex TW8 9BD.





They Trust Your Advice for Treating Head Lice. And with new Suleo Lotions, compliance has never been easier.

Until now, eradication of children's lice has always been a worry for mothers. They believe the strong, pungent smell of traditional lotions is an instant flag to others that the family has lice. And because 12 hour contact was recommended, this often resulted in extra laundering of school hats and pillow cases.

But now, you can be much more confident of parental compliance with a

louse control regime because International Laboratories have introduced Suleo-M Lotion (with malathion) and Suleo-C Lotion (with carbaryl). This new Suleo lotion range kills head lice and eggs in two hours. After this time, the patient's hair can be washed with an ordinary shampoo. This ten hour advance in speed of treatment enormously enhances the prospect of full patient compliance.

Suleo-M and Suleo-C Lotions. A Major Step Forward in Louse Control.



Another Guaranteed Product from International Laboratories

1985 Kodak Awards



Will it develop into a golden summer?

What a great start to the 1985 photofinishing season. The prints that were sent in by photofinishers in April were of such a high quality that no less than ten laboratories achieved the Kodak Point Standard. They make up the first Table of Merit in the 1985 Kodak Awards for Quality Scheme.

Now competition is increasing for the prestigious Silver and Gold Awards.

Our congratulations to the ten laboratories who are well on their way to winning the first Silver Awards of 1985. These will be awarded when the Kodak Point Standard is achieved for two consecutive months.

And let's hope they can make this summer Golden by winning a few Golds too!



ards for Quality.

TABLE OF MERIT, APRIL 1985.

Colourcare International, Downton
Colourcare International, Livingston
Colourcare International, Neath
IPF (UK) International
Photofinishers Ltd, Glasgow
T. Litster, Peebles
Photolab Express, Cardiff
Photolab Express, Birmingham
Photofinish, Guildford
Regency Film Services Ltd
S. H. Shayler Ltd, Carterton



THE KODAK AWARDS FOR QUALITY.

The competition is open to all independent photo-finishers who use Kodak 'Ektacolor' paper and formulated chemicals.

Kodak and its subsidiary companies are excluded.

All photofinishers who regularly and continuously return full sets of quality monitoring strips to the Kodak Monitoring Service are automatically included in the scheme which runs from April to December 1985.

For pictures that match the memories.



Kodak and Ektacolor are trademarks

R-V launch Ulay cleanser

Richardson Vicks are entering the cleansing sector of the skincare market with Ulay beauty cleanser (150ml, £2.35) — with a support expenditure of £1.4m.

The cleanser is described as light and non-greasy. "It not only removes dirt and make-up but also the dry layer of skin cells. Its similarity to Oil of Ulay ensures its popularity with the four million current users", says the company.

The product is targeted to achieve a 30 per cent brand share of the cleanser market which in 1984 was estimated at £33m and Richardson Vicks predict that it will grow by 21 per cent in 1985.

To support the cleanser, one million packs of Oil of Ulay will carry a 30ml trial sample, a further one million will feature a 50p voucher while 3 million will carry a free write-in offer. In addition, two million households in the London area will receive samples in what the company describes as



one of their largest ever campaigns.

Advertising in the women's Press will start in the Autumn and run through to Spring 1986. A television campaign will start in the London region during October/November and go through to national coverage in March 1986. "The advertising will aim to attract new users as well as existing Oil of Ulay customers as there is much potential at the younger end of the market," say *Richardson Vicks Ltd, Rusham Park, Whitehall Lane, Egham, Surrey TW20 9NW.*

Seltzer on air

Alka Seltzer are running a radio advertising campaign nationally to mid-August.

The campaign features six 20-second commercials using humorous situations most likely to arise during the holidays. *Bayer UK Ltd, Consumer Products Division, Bayer House, Strawberry Hill, Newbury, Berks RG13 1JA.*

Reckitt branch out all over

Reckitt are branching out into a tree appeal, linking Harpic products with the Woodland Trust in an attempt to raise enough money to plant 20,000 trees in 1986.

The appeal runs from July until the end of January 1986 and 2.6million Harpic packs will display its logo of a red squirrel in a tree. Also featured on packs will be "acorn" tokens, to be sent in by customers. For every four tokens Harpic will plant a 3ft sapling, and donate £1 towards the care of new and existing woodlands.

Anyone sending in at least four tokens together with a completed tree appeal card will have a tree planted in his or her name which will be recorded in the

Woodland Trust book of commemoration. They will also receive a certificate.

POS material is available. *Reckitt Products, Reckitt House, Stoneferry Road, Hull HU8 8DD.*

Pond's pen adds polish

The nail polishing pen is a new addition to Chesebrough Pond's Perfect Colour cosmetics range which, says the company, is "set to revolutionise nail care". It is being launched with £3.5m support.

The pen, available in 15 shades and retailing at around £3.50, is a self-contained unit with a flow-through fibre tip applicator. Chesebrough Pond's claim that its new spill proof formula allows a woman to go from bare nails to a finished, dry manicure in five minutes.

The product is to be supported by a nationwide television campaign in October running through to December. Displays using the theme, "revolution at your fingertips" are available for counter and gondola units or separate counter sitting. The pen also slots into existing Perfect Colour merchandisers.

Pat Hipkin, product manager for the range, foresees increased nail polish usage in a market claimed to be worth

More cash with Ashe

Ashe Laboratories are giving extra value offers on two of their Vitapointe and Eugene products.

A 20 per cent extra value offer on Vitapointe silk rinse conditioner gives customers the opportunity to buy 192ml for the price of a 160ml bottle.

Vitapointe forms styling mousse is to be on offer at 15 per cent extra value — 202ml for the price of 175ml. Both special offer packs are supplied in cases of 12.

Eugene 10 day set and hair thickener each carry a 35 per cent extra value offer so consumers can buy 135ml of either product for the price of a 100ml pack. *Ashe Laboratories Ltd, Ashetree Works, Kingston Road, Leatherhead, Surrey.*

Bayer bite back

Bayer UK are backing the Autan insect repellent with a £1½m television advertising campaign in the Yorkshire TV region during July and August.

The advertisement uses the catchline "Autan — insects find it utterly repellent". *Bayer UK Ltd, Consumer products division, Bayer House, Newbury, Berks.*



£41m and growing at 15 per cent a year. "We expect to encourage new users discouraged from using conventional polish because of its basic inconvenience."

It will be available to Boots for four weeks from July 29 but then available everywhere. *Chesebrough Pond's Ltd, PO Box 242, Consort House, Victoria Street, Windsor, Berks.*

Cusson's Pearl is in the pink

Cussons are introducing a pink version of Pearl to increase its share of the beauty soap market.

The new oyster pink Pearl retains the curved shape of its counterpart but has its

own fragrance. And a pinker variation of the iridescent carton signals the new variant.

Cussons are spending £1.2m on television advertising for Pearl in the next 12 months, promoting pink on its own as well as the two variants together. Promotions include offering 100 consumers the opportunity of winning free pink and white flowers for a year.

"Since its launch in Spring 1984 white Pearl has taken five per cent of the total £91m toilet soap market. Its presence has forced a substantial increase in the female beauty sector — now worth an additional £3m at retail over the previous year," says sales and marketing director Colin Hession.

"The potential for expansion in Pearl sales lies in the current make-up of beauty soap sales: coloured soaps account for half the business. The new product will attack products such as Camay and Lux head on," added Mr Hession. *Cussons (UK) Ltd, Kersal Vale, Manchester M7 0GL.*

Cussons Pearl
natural white
For those precious moments in the bath

NEW Cussons Pearl
oyster pink
For those precious moments in the bath

Have a Fiesta with Robinson's

The third edition of Robinson's baby foods magazine *Early Days* features a chance to win a Ford Fiesta.

Entrants have to guess the number of packs of Robinson's products there are in the car featured in the magazine.

The magazine has a print run of 170,000 and is to be distributed to clinics, chemists and directly to mothers with young babies, say Robinson's.

Because of the magazine's success it will now be produced on a quarterly basis, each issue tailored appropriately to the time of year. *Reckitt & Colman Products Ltd, pharmaceutical division, Dansom Lane, Hull HU8 7DS.*

Bringing colour to the fingers

Richards and Appleby are introducing six new polish colours to each of their colorglaze and fashion glaze nail ranges.

The colorglaze mini display has been revamped to hold three of the new shades along with three established colours. The fashion glaze additions are six "nautical" colours and the colorglaze shades are based on the "mist" theme.

A polish kit with lighter colourways is being added to the Nailoid travel kits, carrying the misty pink, iced dawn,

Chemist & Druggist 13 July 1985

Spring and morning mist shades. *Richards & Appleby Ltd, Gerrard Place, East Gillibrands, Skelmersdale, Lancs.*

Pure Perfection

Pure Perfection have launched a range of natural skin care products, including oils (£0.75-£1.88), skin toners and astringents (£0.65-£1.40), hand and body lotions (£0.75-£1.13) and pot pourri (£0.90-£1.25).

The range will be available initially in the Home Counties but the company hopes to extend distribution nationally by the end of the year. *Pure Perfection, PO Box 32, Crawley, West Sussex.*



First prize in a national window display competition run by Warner Lambert Health Care has been won by pharmacist Rosalyn Newton, of Rushworth and Newton, Robin Hood Chase, Nottingham. Mrs Newton was presented with £1,000 worth of holiday vouchers by Adrian Small, district sales manager (left) and Jeff Waller, area representative

Hair Decorations and Hair Care Products Celeste and Little Miss Muffet



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Repackage, support, launch and buy

In 1980 Crookes Products were ranked 53rd in the IMS* table for OTC manufacturers selling to chemists. By 1984 they were in second place. C&D looks at the rise of Crookes Products and the marketing philosophy that has given them such a high profile so quickly.

Only one company — Beecham — sells more OTC products to chemists than Crookes. Five years ago there were 52.

The rise of Crookes Products has been largely due to the launch of Nurofen, the first OTC ibuprofen, and the acquisition of Optrex last year. But there is much more to it than that.

Boots bought Crookes in 1971 to provide additional branded products and a ready-made national sales and marketing infrastructure to exploit their development and manufacturing expertise. The subsidiary traded throughout the '70s as Crookes Anestan, marketing established Crookes products, like halibut oil capsules and multivitamins, alongside former Boots own-brands, such as Sweetex.

The end of the patent life of Brufen at the close of the '70s, and the realisation that ethical expansion was directly related to the discovery of new compounds, led Boots to review their corporate strategy. It was decided that more emphasis should be placed on consumer products, paving the way for an expansion of the now renamed Crookes Products Ltd.

The Crookes portfolio is an impressive one, containing several brand leaders and others pushing the top slot in their market sectors. "Our objective is to develop leading brands through products positioned with a strong point of difference," says Ken Robinson, director of consumer products marketing. "For example, take Complete Care — an extremely good hand cream with the plus of nail protection. We have put these together to provide a novel addition to the marketplace."

Brendan Hopkins, head of toiletries and food products marketing, has E45 cream in his stable. "This is a product which has grown over the last four years faster than our total business," he says. "We took an established product, repackaged it and

targeted it towards dry skin conditions — and have enjoyed excellent growth which we believe will continue."

Over the past five years Crookes have employed a number of growth strategies.

They have remarketed and repackaged existing products (Sweetex, Femfresh). They have put more advertising and marketing behind many semi-ethical products (PR Spray, Mycota, Strepsils). They have introduced new products (Nurofen, Complete Care), and have acquired established brands (Optrex).

"These four routes can all claim a measure of success," says Adrian Huns, head of healthcare products marketing. "We are not in favour of marketing products in sectors where it is difficult to differentiate between brands or difficult to make progress without sheer weight of advertising." Says Mr Robinson: "We want to achieve a number one position in as many of our markets as possible. If a product is not already there, we have set out to get it there."

Success with Nurofen

Nurofen, launched in 1983, is one success. Crookes say the brand is third in the analgesic market, with eight per cent of sales.

Peter Nottingham, head of new products marketing says this success is due to the way the company has marketed the product and the support given by pharmacists.

"The hallmark of the marketing of Nurofen is that we have been extremely professional in handling our publicity," he explains. "Firstly, we didn't want to muddy the waters of the POM to P movement. Secondly, as 'parents' we wanted to make sure the drug itself had the widest opportunities. And we wanted the edge when marketing elsewhere."

Ibuprofen is currently marketed as an OTC product by Crookes in four countries — the UK, USA (Advil), Ireland (Nurofen) and Holland (Nerofen). Mr Nottingham is confident that by the end of the year at least two more countries will be on the list. He says that one fifth of Nurofen sales are due to pharmacist recommendation, and the trade support has led to consumer loyalty and repeat purchase.

Boots recently received the Queen's Award for Technological Achievement for developing ibuprofen, some years after its discovery. Ken Robinson, for one, believes

that a major part of achieving that award has been the additional success of the OTC product, and Crookes are considering adding the Award mark to Nurofen packs.

The past five years have seen a considerable investment in advertising.

"The majority of our brands enjoy healthy levels of television support, and we have seen time and time again that good distribution and display combined with appropriate TV expenditure can yield substantial benefits," says Ken Robinson. He points to Nurofen and Optrex as examples. "With Optrex we have been able to develop the range significantly since acquiring the brand, whereas the previous owners were seeing declining business due to reduced advertising support."

Crookes are based firmly in chemists. "But we are finding in some sectors that the market is moving away from chemists. If the consumers are moving, we have to keep our brands as competitive as possible and move to where the market is," says Adrian Huns. "We have, however, followed rather than led, and it is important to note that all our new products have been Pharmacy-only."

Mr Huns cites the sweetener market as a good example of the trend. "Sweetex was marketed for many years primarily to chemists, but new competition has moved into grocery at a rate we cannot ignore."

"Our relationship with chemists is a good one," says Kevin Wilson, general sales manager. "We are seen as very innovative and professional in the launch support and servicing of our products. We believe in a very deep trade penetration and cover 9,000 independent chemists every eight weeks."

And for the future, Boots have certainly invested in the consumer side of their business. Crookes have the largest tableting plant in the UK, one of the largest quality control departments of its kind, and a new consumer development plant all available on the Nottingham site.

"We are determined to develop this business as fast as possible," says Ken Robinson, "and this will mean investing in acquisition, in many cases to give us a better vehicle internationally."

Though the 1984 turnover of the company — £25m — is still peanuts compared to the Group turnover of over £2,000m, Crookes' sales have quadrupled since 1980. The management, not surprisingly, are optimistic about the future.

*International Medical Statistics



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Prescribing Information

Presentation: A dual sachet pack. Each individual sachet contains 4g Piperazine Phosphate BP standardised sennos equivalent to 15.3mg total sennosides calculated as sennoside B. Uses: A potent anthelmintic for the eradication of threadworm and roundworm. Dosage and administration: Adults and children over 6 - 1 sachet. Children aged 1-6 years - 2/3 sachet (2 level 5ml spoonful). Infants - 3 months to 1 year - 1/3 sachet (1 level 5ml spoonful). Pripsen should be stirred into a small glass of milk or water and drunk immediately. It is best taken at night by adults and in the morning by children. The follow-up dose should be given 14 days after the first dose to eliminate reinfestation. When treating roundworms further treatments at monthly intervals may be necessary to eliminate reinfestation. Contra-indications, warnings, etc.

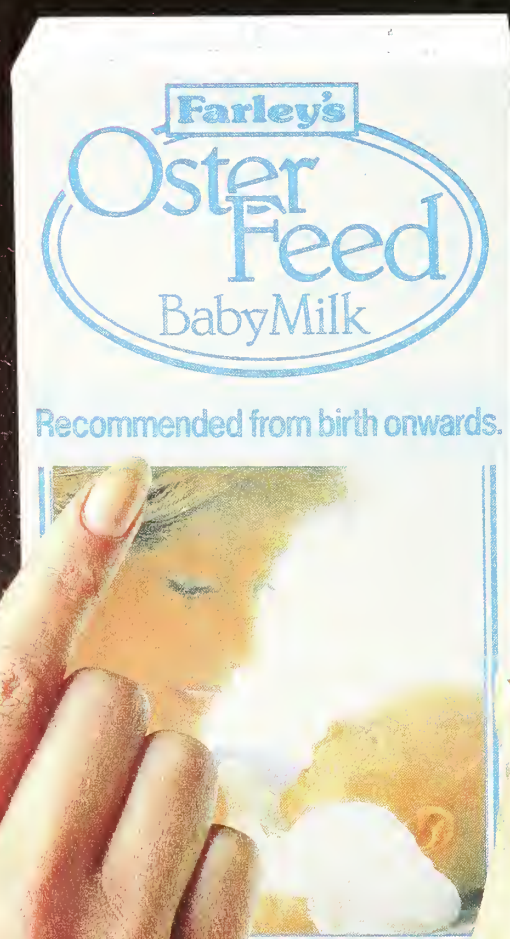
Pripsen should not be used in patients with severe bilateral renal dysfunction. As doses are normally separated by at least 14 days the rare neurotoxic side effects of piperazine (transient visual disturbance and vertigo) which are due to cumulative blood-levels, are unlikely to occur and have not been reported. Although Pripsen has not been associated with any reports of teratogenicity, in common with most drugs, its use in the first trimester of pregnancy is not advised.

Retail Price £1.15 per dual sachet pack (June 1985).

Westminster Laboratories Ltd. For further information Reckitt & Colman Pharmaceutical Division, Dansom Lane, Hull HU8 7DS. Telephone: 0482 26151.

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*M.A.S. Survey Research

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Fire...and how to stop it happening to you

Each year hundreds of shops are destroyed by fire. Yet often the damage could have been reduced — or avoided — by following a few simple rules.

In spite of large scale publicity and legislation, fire in businesses is still frighteningly common. Fire can affect businesses great and small, involving both loss of lives and a huge financial cost.

It is extremely important, if you have any doubts about fire risks in your business, to take active steps to remove those doubts.

You should remember that, apart from the inconvenience and danger to life and limb, allowing risks to continue could result in prosecution or a heavy fine.

If you employ staff, you are under a legal obligation to ensure they know what fire precautions to take and what to do if a fire breaks out on the premises.

An inspector, who may call on you, can question your staff. If it is discovered that no proper instruction has been given and no fire drills carried out, you could be in

danger of being prosecuted.

Not only should you give verbal instruction; you should put down in writing the steps your staff should take. This is especially important where customers *and visitors* frequent your premises since you are also under a legal obligation regarding the safety of your customers.

If there is more than one exit from your premises, you should give instructions as to which to use. You should also ensure such exits are not blocked or obstructed in any way.

Directors of a company in one case were given suspended prison sentences when blocked fire exits caused the death of people on the premises.

Check whether you have adequate appliances to deal with fire. See that they are in working order. You are guilty of an offence if you do not have appropriate appliances, or if those you do have are not working properly.

Finally, if any doubts remain in your mind, call in the local fire prevention officer from the fire brigade who will be able to advise on any further steps you might take.

Don't forget the formalities

More and more businesses are being hemmed in by laws that seem to flow out in a never-ending stream.

Some businesses have reached the stage where they just plough on regardless, trying to make their operations a success, and just hope they are keeping to all the laws laid down.

Sometimes they are lucky; sometimes not. However, there are some formalities which the law requires you to follow and, since these can be adhered to without too much effort, it is worth drawing attention to them so the risk of fines is cut down as much as possible.

First, if you are trading under a name other than your own, then you must display on your premises a certificate showing the business name and the name or names of the true owners.

Since a homemade certificate will do, there is no excuse for not putting up such a notice. It will at least satisfy any inspector who might call, and save you from the possibility of a fine.

There is another law involving the display of certificates. If you have any employees, you are obliged to insure against claims for negligence that has caused injury to them.

As a matter of prudence, you should already have done this as part of your business insurance.

However, the law requires you to display a certificate to this effect where an employee can see it. It is worth checking this is the case. If not, get in touch with your insurers. They can normally supply you with such a certificate.

There is one other formality you should follow if you have employees. Under employment legislation, you should ensure that, when you hand over a wage packet or a salary cheque, you also give to the employee concerned full details of any deductions you have made. This is so whether deductions are required by law (e.g. national insurance or income tax) or whether deductions are those authorised by the employee.

A failure to do this can result in a claim from the employee for a lump sum equivalent to the deductions that have not been shown.



New rules on dismissals

New rules are being introduced regarding the qualifying period an employee has to serve before being able to claim compensation for unfair dismissal.

At present, where an employee works for a company with 20 or less employees, he has to have worked there continuously for two years or more before he can lodge an unfair dismissal claim before an Industrial Tribunal. In the case of a firm with more than twenty employees, the period of qualification is only one year.

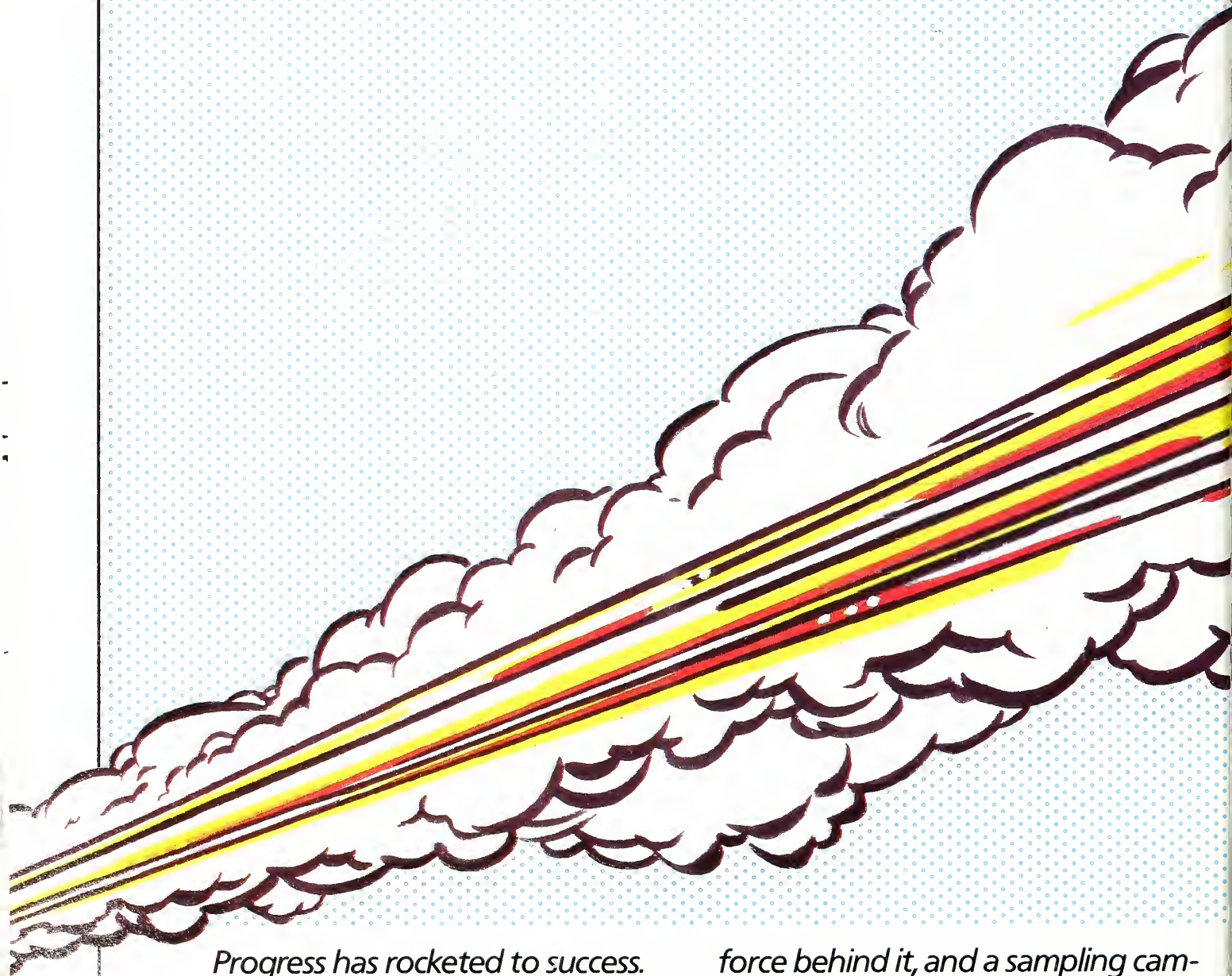
It was announced in the Budget that this latter period will be raised to two years, bringing all employers into line. An order will be laid before Parliament setting the date for change. Existing staff will still have the same rights they have now.

This brings the rules for unfair dismissal into line with the qualifying period for a redundancy payment. When the new regulation comes into force, a two year qualifying period will be the norm.

The only exceptions (and cases have been few and far between) will be where dismissal takes place by virtue of trade union membership or where race or sex discrimination leads to dismissal. Here no minimum period of service is required.

One more change is worth noting. Until now, employers who have made a redundancy payment in accordance with the rules has been able to get 41 per cent back from the central redundancy fund. In future this will be reduced to 35 per cent.

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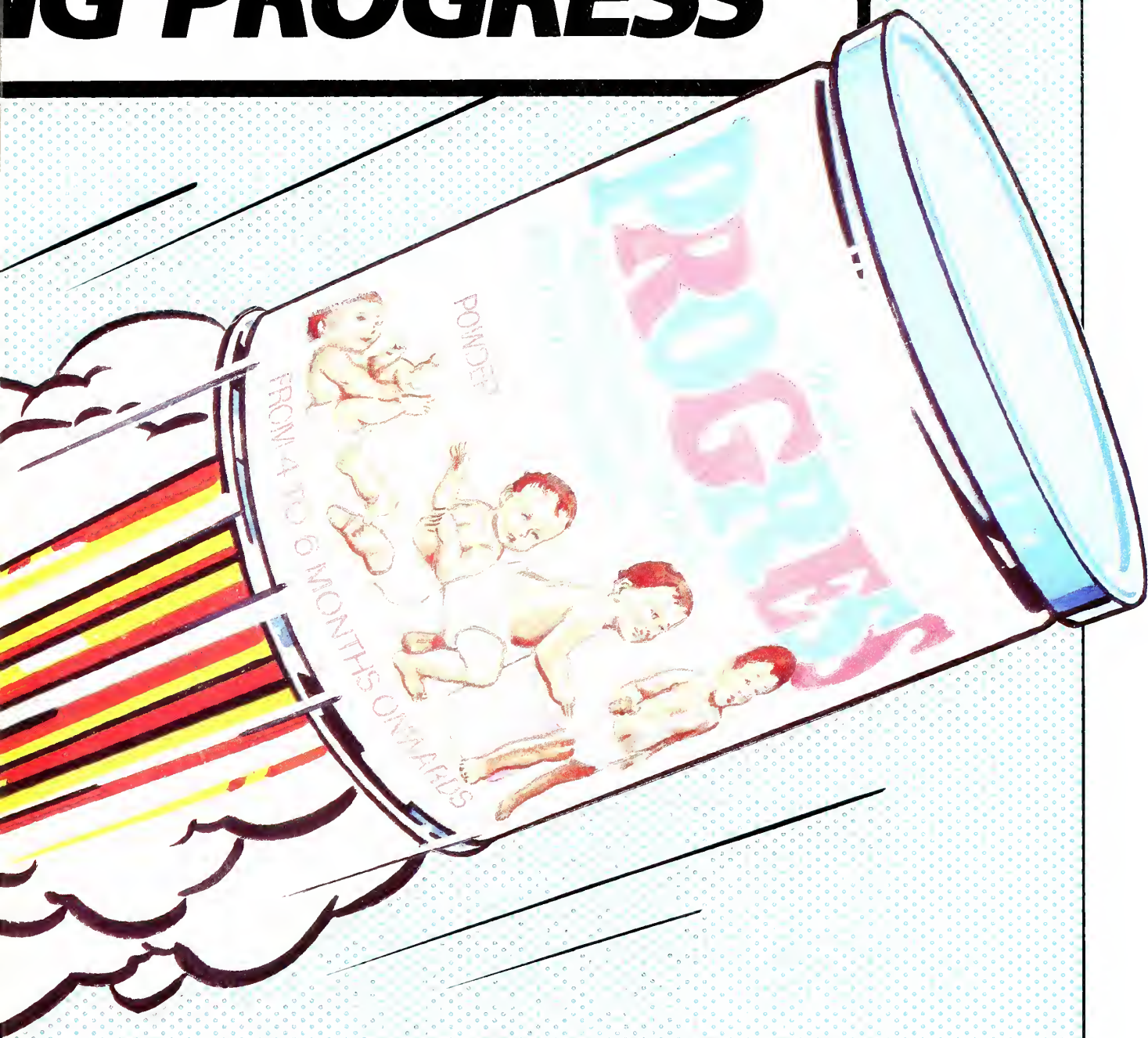
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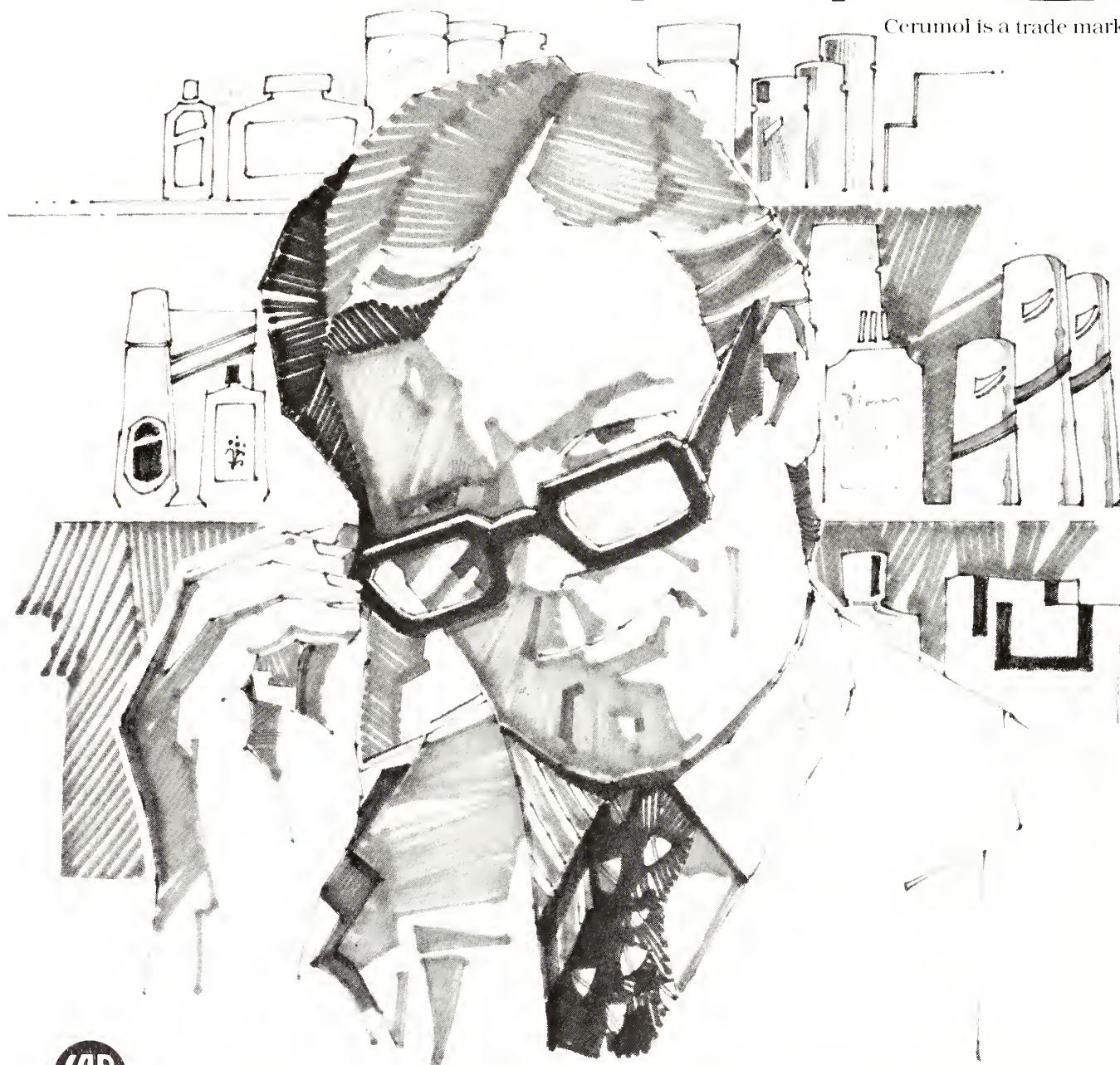
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Drug prices, the industry and the DHSS — the PPRS melting pot

Is the Pharmaceutical Price Regulation Scheme about to collapse? Profit targets were reduced again in April, further cutting the industry's return on its investment, and there has been renewed political and Press criticism of the running of the scheme since the industry's campaign against the limited list. *C&D* spoke to the ABPI and the DHSS about the next moves in the PPRS game.

The past six months have been a bad time for the pharmaceutical industry. Following the introduction of the limited list and a further reduction in overall profitability under the PPRS, relations between the industry and Government are at a low ebb.

"The Government has reneged on the spirit of the PPRS arrangements," says Peter Lumley, spokesman for the Association of the British Pharmaceutical Industries. "They have jettisoned the principle and purpose of PPRS and it is not working very well at the moment."

By and large, the industry would agree that PPRS and its predecessor, the Voluntary Price Regulation Scheme, have been a good arrangement, and have fulfilled the two key objectives. The scheme says that "safe and effective medicines should be available on reasonable terms to the NHS, but also that a strong, efficient and profitable pharmaceutical industry" should exist in the UK. Mr Lumley says that the June 1983 election was a turning point.

"The way PPRS has been operated has changed since Norman Fowler and Kenneth Clarke came to the DHSS," he says. "They have gone for trying to give taxpayers value for money but have forgotten the other objectives — the development of good medicines and exports."

It is true that the industry's profitability on its NHS business has been markedly reduced since the last General Election. The industry agreed to a 2½ per cent price cut across the board from August 1, 1983, with a price freeze through to the following March. And the outcome of a 1983 Department of Health review of the PPRS was a cut in the overall profit target by four points to 21 per cent on capital from April 1, 1984. "At that time, Mr Clarke said they had got the balance right," says Mr Lumley.

The latest cut in profits, down to an undisclosed figure thought to be 15 to 17 per cent, took effect on April 1 this year, at the same time as the limited list. In addition, the "grey area" above the profit target level, within which a company is allowed to keep excess profits at the discretion of the DHSS, depending on how those profits are achieved, has also been squeezed, from 10 per cent on capital to a third of the company's target. It means that, before April 1984, a company with a profit target at the top of the range would have been allowed —

provided the criteria for keeping excess profit were met — a 35 per cent return (25 per cent target plus 10 per cent "grey area"). Now, a company at the top of the range, under the same circumstances, has a "maximum" profit of around 23 per cent (17 per cent plus 6 per cent).

Sales promotion allowances have been reduced too, from 10 to 9 per cent of sales. So is the DHSS losing sight of the second objective — that of sponsoring a "strong, efficient and profitable industry?"

The permanent secretary at the DHSS, Sir Kenneth Stowe, told the influential Commons Public Accounts Committee last year, that there was evidence that the second objective of PPRS was being achieved. "Figures for the last six years show a steady net favourable balance of exports over imports for the UK pharmaceutical industry," he said. "R&D costs are showing a generally upward trend. The industry ranks as one of the six largest in the world."

The latest cuts

In its report, the Committee welcomed the profit target cut backs. Indeed, in comparing the target rate for the pharmaceutical industry with that for other Government risk contractors — 16.9 per cent — the Committee said the difference was still high and needed justifying.

The ABPI says that the latest round of cuts and the introduction of the limited list could lead to the loss of substantial investment in the UK.

"Wyeth have cancelled investment in Swindon, and A.H. Robins, who had earmarked Langhurst in Sussex for new plant, are now actively looking elsewhere," says Mr Lumley. "Mr Fowler may claim that this is an idle threat, but the real damage may only become apparent after three to five years, and nobody will know how many research projects have been cancelled and how much investment lost."

The CPA has investigated the PPRS again this year, taking evidence from the DHSS and the ABPI on March 18. A report is expected later this month. "We are hoping that the CPA will acknowledge that the target profit level is now too low," says Peter Lumley.

It seems unlikely.

Parallel with these discussions between the industry and the DHSS about a reasonable overall profit, there has been

criticism of the operation of the scheme from both inside and outside Parliament.

Dr Joe Collier, senior lecturer and consultant at St George's Medical School, suggested in *The Lancet* recently that the factors considered by the DHSS in its calculation of the profit target for a company were open to manipulation.

Dr Collier suggests that manufacturing costs have been increased by means of transfer prices — the charges a company makes when it "sells" goods to an affiliate in the same national or even multinational group. The CPA too has been concerned that this is a major area of abuse.

But the DHSS says there is no easy answer. The Department has increasingly asked companies to declare the makeup of the transfer price shown in the accounts. Still not satisfied, in 1983 the DHSS commissioned a firm of private accountants to look into the whole system. Their study, which will not be published, should be completed in the next four to five months, says the DHSS. However, the Department admits that, in reality, that will not solve the problem because companies and their practices change all the time.

The sales promotional allowance and how promotion is carried out has been the focus of political and Press attention for years. MP Richard Hickmet (Conservative Glanford & Scunthorpe) has been bombarding the Health Minister with questions on the PPRS since January. He is worried over the lack of control that the DHSS has over the industry's costs.

"I am particularly concerned that as much as £150m a year should be spent on sales promotion," he says. "At the end of the day, the NHS is paying for the advertising of drugs which it wants to buy itself. I suggested to Kenneth Clarke in the House that the Government could save as much as £100m by controlling sales expenditure. He said he did not feel it was that much, but it may be an area to look at in the future."

The DHSS says ministers are very exercised about the cost of sales promotion. The amount allowable has recently been reduced and a penalty clause introduced. This clause, under which companies overspending have to pay the excess back to the DHSS, is intended to stop companies deliberately overspending and forcing competitors to do the same to stay in the market, creating a spiral of promotion costs.

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With the cut in promotional allowances, the DHSS is bound to be watching other costs very carefully, to see they don't rise in compensation.

Joe Collier says expenditure on research and development is perhaps the most controversial of the factors considered in the PPRS because the allowances most directly reflect the Department's responsibility as sponsor of the industry. "The costs are increasing most rapidly, from £82m in 1978 to £247m by 1983. The reasons for this remain obscure and the non-interventionist stance of the DHSS has prevented any search for them," he says.

The DHSS does not ask companies to detail research costs. So long as the budget is not out of line with the rest of the industry, the Department is content. It says that the PPRS only bites if R&D costs look excessive.

They use two general criteria. Firstly, R&D expenditure as a percentage of turnover and secondly, with foreign-owned companies, the cost of R&D as a factor of sales for this country, compared with the same ratio for the company worldwide. Excessive costs are disallowed.

The ABPI says that many of the criticisms of the industry are unfair. "The Annual Financial Returns are very detailed and have to be audited," says Peter Lumley. "No other industry has to be as accountable to Government, except, perhaps, for those involved in defence contracts."

The ABPI points to research and development as the one element that sets aside pharmaceuticals from the rest of manufacturing industry. "Research is important," says Peter Lumley. "It takes 10 years on average to get a product to the market at a cost of £50m to £70m."

In its submission to the CPA last year, the ABPI pointed to a number of elements of risk on medical and scientific grounds; potential products can fail at any stage of their development, and even after marketing can fail on the grounds of safety and/or

The PPRS operates on the basis that the health departments are effectively monopoly buyers of all prescribed medicine sold in the UK. Therefore the prices of individual products are not for practical purposes significant, provided the overall costs and profits of the manufacturing companies in the production of NHS medicines are reasonable.

Over the whole industry, a figure is calculated for the rate of return on total historic capital employed on NHS business.

The DHSS then sets each company an individual target according to its contribution to UK industry, broadly based on four criteria:

Investment in the UK;

Research and development expenditure in the UK;

Value added in manufacture in the UK, and

Value of exports.

So a company with manufacturing and R&D facilities in the UK will normally receive a higher profit target than a mainly importing country with no R&D.

Each company covered by the PPRS (all those with NHS sales greater than £1.5m)

tolerance. They concluded that the balance of doubt will always be against the product because it affects the health of man.

"The industry needs to earn a substantial premium profit over other forms of successful industrial investment in Britain if this country is to remain an attractive base for international investment in pharmaceuticals," Mr Lumley says.

So where does the PPRS go from here?

There have been suggestions that the dual role of the DHSS is a major problem, and that the sponsoring element of the scheme should be transferred to the Department of Trade and Industry. There have also been suggestions that the PPRS secretariat at the DHSS is too small — there are just 14 staff — to deal efficiently with the massed ranks of the industry's accountants and financial advisers. The DHSS dismisses both of these arguments.

While admitting that there is a tension between the two objectives of the scheme, the Department says that each time this has been looked at, the conclusion has been that the tension is more easily reconciled in one Department rather than two. And if the DTI were to become involved there would be a tremendous duplication of knowledge and effort. As regards understaffing, the

submits to the DHSS an Annual Financial Return (AFR), which sets out those parts of its business that relate to the NHS, including capital costs, research and development costs, sales promotion, manufacturing costs and profit earned. At the same time, the company forecasts performance for the following year.

On the basis of the AFR and the forecast, a company may be allowed to increase prices to achieve its target. But it may have to reduce prices to avoid exceeding it.

Above each company's profit target, there is a "grey area", currently equal to a third of the target, within which a company is allowed to keep excess profit in certain circumstances — following the development of a drug that is a major advance in treatment, perhaps, or if the company has made major efficiency savings.

The DHSS does not generally allow price rises if a company's profits are in the "grey area."

If the DHSS approves a rise in prices, the company can put up prices as it likes across its range, provided that in the following year, its profit target is not exceeded. If it is found that an increase was unnecessary, the DHSS can claim a rebate.

The PPRS was scheduled to run for five years, to 1983, with either side, DHSS or ABPI, able to give six months notice of termination.

Department says that the number of staff is entirely a function of the nature of the PPRS, which operates as a "by and large" system.

The ABPI, some would say not surprisingly, backs up the DHSS. "The people who run the scheme have much experience in dealing with the industry, so criticisms like that are slightly spurious," says Peter Lumley.

The DHSS appreciates that recent developments have made the industry slightly sceptical of future Government intentions. The next report of the Public Accounts Committee will be significant. It may say that the target profit is now too low, but judging on past reports this is unlikely. What is more probable is that the CPA will welcome the further PPRS profit cuts and suggest that the level is now about right, provided it is satisfied that transfer pricing and sales promotions are under control.

For the industry, hit hard by the way the limited list was implemented, the report may be crucial to the PPRS as it now stands. The original schedule was for PPRS to run to 1983, and it seems likely that the ABPI will ask for talks with the DHSS on a renegotiation of the scheme, before a formal renewal is contemplated.

The DHSS is half expecting it.

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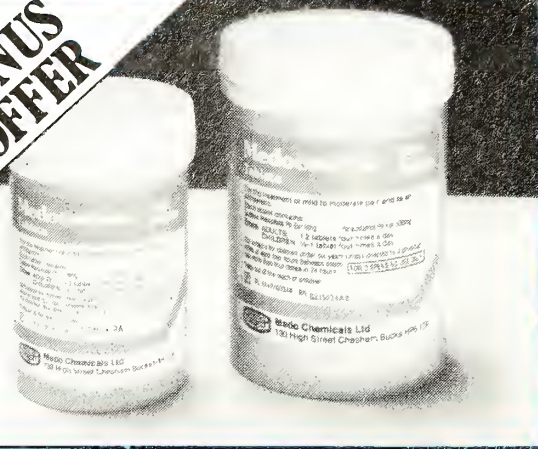
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Stretching drug information units

Your report of the Medico-Pharmaceutical Forum meeting (June 15, pp 1221, 1225) reflects a growing consensus that patients need more information about prescribed medicines — whether verbally, in writing, or both. Drug information centres clearly have a role here, and many information pharmacists see this as a major priority for the future. However, Joan Shenton's remarks at the meeting are misplaced and less than helpful.

Drug information centres are already fully committed in simply maintaining their existing service to NHS professionals; while we answer enquiries from members of the public when they contact us, a formal extension of our service to the general public would be a major undertaking requiring additional resources, possibly to the detriment of other NHS services. It is, therefore,

essential that any developments in this area are based on a sound assessment of the costs and likely benefits; studies to provide this information are already planned.

J.M. Smith

*Principal pharmacist,
Northern Regional Drug Information Unit*

Pushing 'barbs'

I would like to hear from pharmacists who wish to join with me in attempting to modify the January barbiturate legislation amendment to the Medicine Act.

It is my experience that some receptionists are finding it difficult to write prescriptions in accordance with the legislation and, as I'm fed up with having to get them to write the prescriptions properly, I propose that all prescriptions referring to this pseudo Controlled Drugs legislation should be written correctly by a qualified person in the first instance.

Hywel Davies

Caerphilly

End is nigh!

I would like to draw to your attention a full centre page spread in the *Daily Mail* of 3/7/85 — an article on "Health Care in Britain" by Dr Donald Gould.

In a section entitled "How I'd cure the health service" are the following startling statements:-

"In my scheme the High Street chemist would disappear.

"It is clear that the neighbourhood pharmacist is now a redundant animal.

"The disappearance of the dispensing chemists' fees would much more than pay for the computers and attendants needed to ensure the competent supply of medicines at health centres.

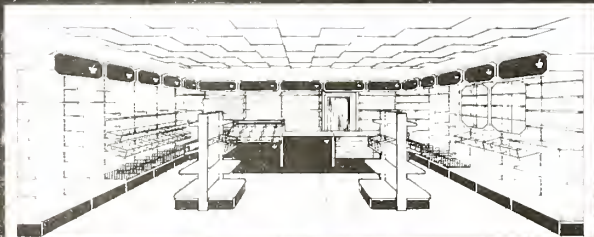
"(So) 'nurse practitioners' could deal with many of the problems bringing clients to the centre."

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PSGB role in guidelines 'not secondary'

The Pharmaceutical Society should not be regarded as secondary to the Pharmaceutical Services Negotiating Committee in negotiations over guidelines controlling entry to the NHS contract.

This assertion was made at this month's Council meeting during lengthy debates on the Society's role in the new contract.

It was emphasised that limitation of entry to NHS contracts affected all pharmacists now and in the future. The Society was the only body that represented their interests.

The negotiations had to be truly tripartite, between the Department of Health, the PSNC and the Society.

President Dr T.G. Booth promised that, if necessary, an emergency meeting of the Council would be called before the August meeting.

It was agreed, however, that in the interests of speedy decisions, the Society's negotiating team would be allowed a degree of discretion.

Among matters discussed by the Council was the award of contracts in rural areas. It was reported that no reply had been received to the letter sent by the president to the Minister for Health proposing the exemption from the new arrangements of applications for contracts in rural areas (*C&D*, June 22, p1271).

The Society has now received from the Department working papers for the proposed regulations and guidelines governing "control of entry," and a tripartite meeting is expected at the Department in mid-July.

Sick pay for pre-registration students In future the Society is not to approve for pre-registration experience any establishment in which graduates would not be paid a salary during any extended period of employment because of sickness.

The Education Committee noted that a district pharmaceutical officer had asked whether, in view of the strict budgeting within the NHS, the Council would object to the inclusion in a contract of employment of a clause stating that any extended period due to sickness would be provided without pay. The hospital would issue an "honorary" contract, safeguarding its liability without the need to pay a salary for the time in question.

The Committee could not accept that the budgeting arrangements in a large

employing authority would be so inflexible as not to allow a salary payment during rare extended periods. It was also considered that graduates should not be disadvantaged because of circumstances, such as sickness, beyond their control.

On the Committee's recommendation, the Council agreed that establishments which offered such an employment contract should not be approved in the future for of pre-registration experience.

The Council also accepted a Committee recommendation that the conditions under which the pre-registration year is undertaken should not be linked to subsequent employment. Although some Committee members felt that a two-year contract was reasonable in that it was a guarantee on both sides of two years' employment, and was signed voluntarily by the students, the majority felt that the conditions of the pre-registration year should not be linked to arrangements for further employment.

Drop in graduates The Education Committee noted that the total number of graduates in 1984 was less than in 1983 and the total number of students undergoing pre-registration experience in industry had risen from 62 to 73. It was also noted that 97.2 per cent of the 1984 graduates from British schools of pharmacy were now undertaking pre-registration experience. In the past two years the Society had not been contacted by any graduate unable to find a pre-registration place.

Support for continuing education The Society is to press for general support for continuing education in pharmacy within universities. A submission is to be made to the health care working group of the joint standing committee on continuing education set up by the University Grants Committee and the National Advisory Body on Local Authority Higher Education. As well as stating the case for general support for pharmacy continuing education the submission will press for support from normal "pump priming" resources.

A separate submission is also to be made to the UGC in support of applications that might be received from schools of pharmacy to new selective "pump priming" arrangements. The Society is to ask university heads of schools of pharmacy to seek support for pharmaceutical continuing education in their university plans for the late 1980s.

The Society is to ask the UGC for resource support for Strathclyde University to provide pharmacy continuing education in South East Scotland. The Society will make its case to the UGC after consultation with Professor Bowman (Strathclyde University) and the Society's Scottish Department.

Diploma fee The course fee for 1986 for the Diploma in Agricultural and Veterinary Pharmacy is to be £450.

Code for farm medicines The Society was among the bodies consulted in the drafting of the new code of practice for the use of medicines on farms, which is currently being printed. The Society has some further comments which it is to submit to the Ministry of Agriculture for future revision.

Greater emphasis on "P" medicines The Society is to make a submission to the Veterinary Products Committee for a review of the Prescription Only Medicines list making the case for a greater emphasis on the "P" category.

Observer on AHTAG Mr R.E. Jones is to replace Mr A.E. Moss as the Society's observer on the Animal Health Trade Associations Group management committee. AHTAG is to be asked to allow for the maintenance of the Society's current observer status, and it will be asked to consider inviting an additional separate representative from the law department to deal with matters relating to the Society's enforcement duties.

Computer policy A computer subcommittee of the Practice Committee is to be established. Its duties will be: To formulate policy with regard to the use of computers within various branches of the profession; to advise the Council on all matters relating to the use of computers; and to inform pharmacists on the use of computers and of prospective developments in that area. The subcommittee will consist of three members of the Council and three co-opted members with appropriate expertise, all members to be appointed by the Society's officers.

Patient information It was reported to the Practice Committee that, following a Medico-Pharmaceutical Forum meeting on "Informing patients about medicines," further meetings were to be held with the aim of creating a better flow of patient information. A meeting with pharmaceutical officers is to be held on November 19.

Drug delivery school A joint postgraduate school is to be held in 1986 in the Chelsea department of pharmacy, King's College, London. The school will cover biopharmaceutical aspects of drug delivery systems.

Rational distribution at the sharp end

After at least 20 years of negotiation we have reached the point where a pharmacist has no automatic right to an NHS contract. Miall James, secretary of Essex LPC and a pharmacy consultant, says the rural dispensing regulations of April 1, 1983 made the first breach in the principle of unrestricted contract (1); he hopes the Regulations which could come into force on October 1 will complete it.

Much was made of the guidelines under which contracts could be given or refused at the LPC Conference on June 23. But it seems to me that, reading the documents supplied to the profession, adequate cover is already available. It is unfortunate, perhaps, that the appeal procedure is not to the Secretary for Social Services. It is surprising that this Government, with its centralisation policies in other fields, has gone for the option of an "appeal court" consisting of the same type of people who turned down the applicant. It is important, therefore, that thought be given as to who will sit on the new FPC pharmacy practice subcommittees and to their duties and powers as outlined in the control of entry document.

Subcommittee make-up

Rational distribution will be operated by this seven-man subcommittee acting with delegated powers. This means that the three pharmacists, the three non-pharmacists and the lay chairman will take decisions binding on the FPC acting in the name of the FPC. The appeal, if any, will be to a similarly constituted committee of a neighbouring FPC. And, while there could be an appeal to the Courts or the Parliamentary Commissioner for Health Service Matters (the Ombudsman), the Secretary for Social Services will not normally intervene. (It should be noted, of course, that in a rural area the applicant will have to go through this procedure and then through that of application to the Rural Dispensing Committee.

Upon the shoulders of the members of the pharmacy practice subcommittee will rest a considerable responsibility, both for financial matters and for the conditions of practice of the profession. Great care will have to be taken in their selection. The six pharmacists — there will be three principal members and three deputies — must be appointed by the FPC, on the nomination of the Local Pharmaceutical Committee. It should be noted that they need not be members of the LPC.

The only criteria laid down in Annex A is



Miall Jones, secretary Essex LPC.

that they are practising community pharmacists or pharmaceutical contractors — obviously, this covers owner-managers, managers, assistant pharmacists and even regular locums (*C&D*, May 25). The definition also should cover district or regional managers of multiple companies. The fact that they do not have to be LPC members leaves nominating LPCs the option of including in their panels successful pharmaceutical businessmen and even pharmaceutical magistrates. These men may not only take a wider view, especially in an area where feelings run high, but also be free from local pressures. I am not suggesting that the local LPC members should have no input; rather they should consider their choices carefully and, in the best interests of patients and profession, include as wide a range of expertise as possible.

The LPC also has an option on the choice of chairman, for while he (or she) must be a non-contracting professional member of the FPC, the person it nominates must be acceptable to the LPC. The LPC

would be wise to start discussions as soon as possible with its FPC, for the duty of chairman may be onerous, and with many new members on FPCs, some background information will be necessary.

Having discussed the membership of the pharmacy practice subcommittee, what are its criteria? At the moment all that has been set down is that a new pharmacy shall be necessary or desirable to maintain an adequate standard of NHS pharmaceutical services. Although many of us questioned initially whether or not the guidelines will be satisfactory, surely those two alternative words provide all the guidance necessary to sensible subcommittee members.

'Necessary' or 'desirable'

When, to the rational mind, is a new pharmacy necessary? When patients have difficulty in getting to one? The answer to that one is "yes," always assuming there are enough patients to make the new pharmacy viable — if there are not, then other things apply. What if the service given by the existing pharmacies is inadequate? A new pharmacy is probably not needed although it may be desirable. No matter how poor the service and how far below the standards of good dispensing practice, anything is better than nothing.

The chief executive of PSNC says that a new pharmacy 2km away from its nearest neighbour will probably get a contract, one 1 to 2km away will possibly get on and one within 1km is unlikely to get one. On this basis the new practice subcommittee will have little difficulty with new shopping centres because any pharmacy there is likely to be viable. The same will apply in new estates, for almost by definition in the Home Counties, they are on "green field" sites and will therefore be distant from existing premises. There may well be more difficulty in areas of inner cities which are being rebuilt. We could be looking at 20 minutes pram-pushing or shopping trolley pulling.

The problem, once necessity has been defined and agreed, will be who gets the contract. Some years ago there was a well

documented case where a developer insisted that he wanted Boots "in." Boots wanted exclusive pharmaceutical rights, leaving the existing neighbouring pharmacist right out in the cold. It seems clear that the only way round this problem will be for the developer to apply for permission for a pharmacy and then sell it off to the highest bidder. However, the individual FPCs may apply the rules adopted by the Rural Practices Committee whereby the actual applicant must open the pharmacy and the right to open cannot be transferred prior to opening (2).

Desirability is somewhat different — desirability, that is, to maintain an adequate standard of NHS pharmaceutical service. Obviously this provides more opportunity for judgment and here, too, the professional standards of the existing pharmacies will have to be taken into account. The pram-pushing or trolley-pulling times quoted earlier may not be so relevant — many of these pharmacies will be within the 2km limit quoted. Should a new pharmacy be allowed to open close to an existing problem pharmacy? The Society's inspector may have complained about it: other complaints

may have been recorded by the FPC, and the local Community Health Council may have been critical. I suggest the answer is "yes." But if someone wishes to open around a kilometre away from a pharmacy employing two or more pharmacists that runs an oxygen delivery service and has excellent relationships with nearly everyone, the applicant should be given a dusty answer. Desirability, therefore, is going to require evidence.

Rural complexities

Rural areas present a further problem. A successful applicant to the pharmacy practice subcommittee is going to have to take his case to the Rural Dispensing Committee — there could well be a case in which a necessary or desirable pharmacy might prejudice the existing medical or pharmaceutical services. Here, while I can see no objection to the presence of a prescribing doctor on the practice subcommittee, I could see considerable objections to the presence of a dispensing GP. Before long some agreement is going to have to be worked out for rural areas, otherwise I can see cases of dispute arising

between the adjudications of the subcommittee and the RDC. Because the Secretary of State will make the final decision, he is going to have to make some re-arrangement. I am not asking for a re-negotiation of Clothier but, as most of the possible town sites will be taken, any pharmacist who wants to open on his own, without a partnership, is going to have to look to a rural area.

We have set up a system which will require some careful thought. FPCs are now bodies with a strategic planning responsibility and LPCs are going to have to discuss with them the implications of their plans, and think very carefully about those implications. There is also an urgent need for the Pharmaceutical Society to become involved, for without its active participation control of standards could pass in part to the Family Practitioner Committee. I suggest though that the guidelines are already there. "Necessary" is easier perhaps — "desirable" really does give us the chance to raise standards and improve service.

References

- 1 NHS (General Medical and Pharmaceutical Services) Amendment Regulations 1983 SI (1983) 313
2. Private communication

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Misconduct by superintendent

The superintendent pharmacist of a Tottenham chemist shop where medicines were illegally sold by an unqualified assistant was found guilty of professional misconduct recently.

The Statutory Committee was told that Mr Arunkumar Patel was one of three directors of Meanhurst Ltd which owned the shop on the Gt Cambridge Road.

In May last year a Society inspector visited the premises on a Saturday afternoon and was sold Benylin cough mixture and Veganin tablets by the wife of the manager in the absence of a pharmacist.

Solicitor, Mr Josselyn Hill, said the company was subsequently convicted at Tottenham Magistrates Court of two offences under the Medicines Act and

fined a total of £200 with £250 costs.

When the inspector asked if a pharmacist was in attendance, the shop manager, Mr Hassan Ally, said he had gone to lunch at about 2.30pm, and should be back in an hour. But when the pharmacist was questioned he said he only worked until 1pm on Saturdays.

Mr Patel told the Committee that he normally worked at the company's other shop, but took over at the Cambridge Road premises on Saturday afternoons.

At the time of the offences he had planned to go away and instructed Mr Ally to arrange for the regular chemist to do the full Saturday duty on May 26. When he heard nothing more he assumed that the chemist had agreed to do so.

The chairman, Sir Carl Aarvold, said Mr Patel's explanation threw grave doubts on his reliability even if his account was an accurate one.

But the Committee felt it right to give both the company and Mr Patel the opportunity to prove their good faith and decided to adjourn the inquiry for a year.

Unlawful 'P' sales being reprimanded

An East Molesey company was reprimanded recently for unlawfully selling Pharmacy only medicines from a pharmacy in Walton Road.

The Statutory Committee was told that an inspector who visited the shop, belonging to Extrasave Ltd, in May last year was sold a bottle of Benylin cough mixture and Codis tablets by an unqualified director, Mrs Usha Kundra, in the absence of a pharmacist.

Solicitor Mr Josselyn Hill said Mrs Kundra and the company were subsequently convicted of two offences under the Medicines Act — and each fined a total of £200. Her husband, Mr Balkrishan Kundra, admitted a similar offence involving Codis tablets and was fined £100.

The Committee also considered an allegation of misconduct against the former superintendent pharmacist of the company, Mr Yadwinder Singh Gill, of Raleigh Road, Southall, but decided to take no further action against him.

Mr Kundra said he did not appreciate that certain proprietary medicines should not be sold in the absence of a pharmacist. Mr Gill said he marked the containers of all Pharmacy only medicines with labels, and had instructed the staff not to sell them in his absence.

Sir Carl said it was not surprising that Extrasave found itself contravening the law within one month of opening when the owner thought that all he had to do was to employ a qualified pharmacist, and leave the proper conduct of the business to him.

Mr Gill came very close to failing to fulfill his responsibilities as superintendent pharmacist.

Poor labelling leads to censure

A Liverpool chemist who sold a drug without a prescription and failed to meet labelling regulations was reprimanded by the Society's Statutory Committee recently.

The Committee was told that Mr Jeffrey Bracey, of Menlove Avenue, Liverpool, was convicted of the offences at Sefton last October and fined £100 with £75 costs.

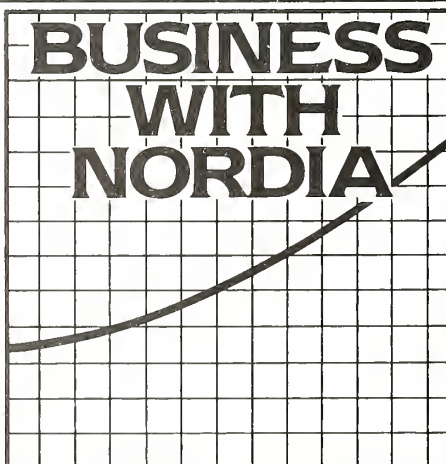
Mr Josselyn Hill, for the Society, said the prosecution followed the sale of a pack of ibuprofen tablets to an inspector at Mr Bracey's pharmacy at Westway, Maghull Town Centre in March last year. The POM container had no label showing the expiry

date or the warning: "Do not exceed the stated dose."

Mr Bracey told the Committee that the sale was an isolated mistake by a woman assistant. He maintained that the labels adequately met the labelling requirements of "counter prescriptions." Mr Bracey said he pleaded guilty to the offences because the sale was not referred directly to a chemist although a qualified colleague was aware of the transaction.

The chairman, Sir Carl Aarvold, said that while Mr Bracey was clearly an able pharmacist, he gave the impression that he was anxious to carry forward his own opinions and campaign.

"The Committee cannot accept that it was a one-off offence in view of the history in this matter," he said. "We are satisfied that the complaint is fully justified."



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Beecham to close down Germaine Monteil

Beecham will close down Germaine Monteil's UK operation at the end of the month. This comes just weeks after Monteil announced a name change, plus plans for product relaunches and promotional support.

Royal Secret and Trussardi fragrances will go to sister company Lenthéric Morny, but it looks like the company's colour cosmetics and skincare lines will disappear. The full Monteil range will still be available in Northern Ireland and the Channel Islands, however.

Beecham, who bought Monteil as part of BAT's cosmetics business at the beginning of the year, say they made the decision after a close look at Monteil's investment plans.

These had been put together as a means of bringing the company's sales up to a viable level. "We decided the plans carried too great a degree of risk" say Beecham.

"We would have had to invest much more than we'd originally anticipated to get business up to a viable level" they go on.

"It's Catch 22 — the more you spend on promotion, the greater the losses become." Germaine Monteil had been trading at a loss for several years, Beecham say. A further blow came when their Oscar de la Renta franchise was lost in May.

Ian Johnson, Monteil's managing director, is one of the 110 staff who will become redundant.

"The prestige fragrance market in the

UK is a very competitive one" he says. "And not very profitable for the smaller companies.

"We had been hoping to tighten up the company's operations, make it more dynamic and start to give the products the advertising support they needed.

"But there was really no medium-term prospect of seeing a reasonable profit for the investment which would have been needed. There wasn't much light at the end of the tunnel."

Most of the staff at Monteil are beauty consultants working in department stores up and down the country. The extra cost involved in employing these consultants is one reason why Beecham feel Monteil will have a better future in Europe and the US.

"They're a tremendous on-cost" says Ian Johnson. "And you need very high turnover to make them pay."

It is hoped the closure of Monteil UK will allow for investment in Europe and America, where no such system of consultants exists.

Beecham say the Monteil name is already "well established and strong" in these markets.

Ian Johnson says Monteil would have had to get sales up to £2½m a year at wholesale prices to become viable. How far off that level are they at the moment? "Very."

"It's difficult to survive in the UK prestige fragrance market unless you're one of the very big names," he goes on. "I'm sure there must be masses of Monteil-size companies who aren't making any money but, for political reasons, their parent companies keep them going."

Synod condemns Sunday trading

The Church of England's General Synod, meeting last week, passed an almost unanimous motion to oppose Government's plans to remove legal restrictions on Sunday opening.

They voted 367 to one for a motion which "strongly deprecates" any move to further commercialise Sunday and calls on the church at all levels to resist deregulation.

Dr Robert Runcie, Archbishop of Canterbury, said Sunday's role as a day of rest was part of "a deep rhythm in the life of the community".

"Not all people can keep Sunday as a special day, but society needs this expression of public religion to enable us to keep our sanity as human beings" added the Bishop of Birmingham, The Right Rev Hugh Montefiore.

"Without a public day that is different, life is just a plateau, it goes on endlessly and drearily, like days without sleep, or even life without death" he said.

Kodak's first four for 1985

Regency Film Services, Colourcare International, Photolab Express and T. Litster are the first four laboratories to win silver awards in Kodak's 1985 scheme.

The awards are based on Kodak's sampling of the laboratories' photofinishing standards, and given for an outstanding performance in two successive months.

Private funding made easier

Private venture capital groups should find it easier to set up business expansion schemes, following changes last week at the Department of Trade & Industry.

Schemes which have already been approved by the Inland Revenue and which also comply with the DoTI's general guidelines, will no longer have to be individually inspected by the Department. Instead, companies offering packages which qualify will simply have to notify DoTI that they are launching a fund.



Kwong Hua — a Chinese pharmaceutical company — recently sent a delegation to Britain to visit Napp/Mundipharma and consider buying their Continus controlled drug delivery system. Seen here with the group is Mr F. Wuest, a Mundipharma director

Record profits for May & Baker in 150th year

May & Baker achieved record of profits of £18.7m in 1984 — their 150th anniversary year.

This pre-tax figure represents a 44 per cent increase on 1983's profit of £13m. Sales rose 19 per cent to reach £376.59m. Overseas business and exports accounted for 54 per cent of group sales. Exports from the UK amounted to £101m, a £14m increase on 1983.

The company's research and development spending was £2m up at £16m. There are plans to spend some £25m on further development of their Dagenham plant. New plant for the production of pharmaceutical active ingredients will account for around £11m of this.

Company facilities in New Zealand, Australia, Bangladesh and Thailand are also in targeted for investment.

"Despite adverse trading conditions

and substantially increased restrictions on the industry, we will have committed ourselves to spending nearly £25m by 1987" says James McAinsh, head of the company's pharmaceuticals division.

Agrochemicals business is still expanding rapidly, with May & Baker's chemicals operation also credited with good performance.

"1985 is expected to be a more difficult year" says chairman Keith Humphries. "Particularly in the UK, where changes in NHS policy will have a serious effect on our medical business. But we are confident that, with the broader geographic and product base of the company, we can continue our upward trend in both growth and profitability."

Despite 1984's "severe constraints," May & Baker's pharmaceuticals division managed a real increase in world sales of 9 per cent.

Aspirin Thai-in for Monsanto

Monsanto have signed a joint agreement with a Thai partner to produce aspirin in Thailand.

They are teaming up with Osothsapha (Teck Heng Yoo), the country's biggest analgesics company, to build an aspirin plant 20 miles southeast of Bangkok. It will have an annual capacity of 1,500 metric tonnes. Construction work should start early next year, with production scheduled in the first quarter of 1987.

The factory will also make acetic acid. Monsanto claim to be the world's largest aspirin manufacturer and already operate production plants in America, Australia and the UK.

Retail sales

The Department of Trade & Industry's May retail sales index (1980 = 100) shows a year-on-year rise of 15 per cent to 182 for dispensing chemists (NHS receipts are excluded). The figure for all businesses rose 9 per cent to 142.

Bedeman team up with Swanson

Haircare manufacturers Charles Bedeman and toiletries makers Swanson & Swanson have been merged to form the Skilcare Group.

The new holding company, which owns all Bedeman's shares, is 75 per cent owned by former Bedeman shareholders, with the remaining 25 per cent going to Guinness Mahon, a subsidiary of

Guinness Peat. Guinness had been financially backing Swanson for some time before the merger.

The company will be headed by Richard Skilbeck, as managing director. He was previously managing director of Charles Bedeman. Bedeman sales director Don Fisher becomes responsible for group sales.

The two sales teams have also now been merged.

Skilcare hope to expand in exporting, and have appointed Vero Trading to handle this side of their business.

Dimplex form new Morphy Richards

Glen Dimplex, who bought Morphy Richards in May, are integrating the new business with their own by creating a new company.

Morphy Richards Appliances pulls together Morphy's small appliances business, Glen Electric and Dimplex Appliances. It will also have rights to the Vidal Sassoon and Moda brand names.

The new company will be based at Morphy's existing premises in Mexborough. Morphy Richards' consumer electronics business will continue unchanged.

Morphy Richards Appliances will be headed by Martin Naughton as executive chairman. Other board members are Brian Wolfe (commercial director),

Malcolm Stewart (key accounts) and Philip Brand (sales). John Forsdyke remains on the board as managing director of House of Carmen.

Briefly...

Touche Ross, one of the UK's largest accountancy practices, is calling on Government to remove the need for small companies to submit annual audits to the registrar of companies. A similar suggestion was made in a Department of Trade consultative document last month. Touche Ross were replying to the Government's "Burdens on Business" report.

COMING EVENTS

Tuesday, July 16

College of Pharmacy Practice. NE Thames study group, Claybury Hall, Claybury Hospital, Woodford Green, Essex, at 7.30pm. "The NHS contract and quality assurance, how to validate a new supplier."

Thursday, July 18

Pharmacists Against the Contract. Leicester International Hotel, Humberstone Gate, Leicester at 8pm. Further information from Jayanti Patel (Tel: 0533 541538). Also Compton Arms, Cadenham, Hampshire at 8pm, July 25. Further information from Richard Searle (Tel: 0525 610591).

Advance information

College of Pharmacy Practice. University of York, October 20. Annual national meeting "Drug and solvent abuse." Attendance fee: associates, £15; others £20. Application and details from Mr R. Dickinson, College of Pharmacy Practice, 1 Lambeth High Street, London SE1 7JN.

Welsh Pharmaceutical Conference. St Brides Hotel, Saundersfoot, October 13-14. Details from Mr S. Southwell, Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN.

Rural Pharmacists Association. Bellrey Hotel, Bimpton Grange, Oxford, November 2-3. John Patten, under secretary for Health speaking on the Sunday. Details from John Davies RPA secretary, 1 The Square, Wiveliscombe, Taunton, Somerset TA4 2JT.

Irish Pharmaceutical Congress. Newpark Hotel, Kilkenny, October 13-17. Fees including board: twin room IR£150, single room IR£175. Registration fee for non-resident IR£15 per person. Details and applications: Mrs E. Fitzgerald, congress secretary, 12 Pembroke Park, Dublin 4.

Chemist & Druggist 13 July 1985

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Further information can be received from writing to Richard Evans, Sales Manager, Heather House Limited, Australasia House, 4a Castle Street, Farnham, Surrey, GU9 7HR. Please also let us have a list of your present companies represented.

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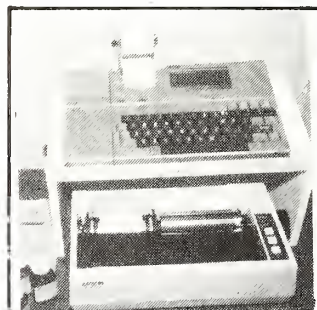
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Last days on the Bench

Ken Callow, FPS, of Bournemouth received tributes and thanks from fellow magistrates in a ceremony to mark his retirement from the Bench after 34 years' service.

Solicitors, probation officers, friends and relatives also gathered for the occasion, and chairman of the bench Mrs Betty Brockbank, JP, spoke of Mr Callow's dedication in the field of probation work.

Mr Callow and his wife Muriel, described by the Bournemouth Evening Echo as "well known local pharmacists", retired from the business in 1983. He became a magistrate in 1951 and was chairman of the bench in 1973.

In 1958 he joined the Magistrates Court Committee and served as chairman for 11 years.

Mr Callow has also chaired the Bournemouth Drugs Advisory Service and the Dorset Branch of the Pharmaceutical Society.

Unichem — on yer bike

Over 35 members of Unichem's Chessington Branch took to two wheels last week in this year's London to Brighton charity cycle ride in aid of the British Heart Foundation.

The cyclists, whose ages ranged from just 16 to 45, completed the 56-mile ride in an average of 6 hours. They had plenty of support en-route with a number of Unichem pharmacists turning out to cheer them on.

Branch employee, Steve Nash, was the first to finish from the team, with Barry O'Gorman second.

It's the first time the branch has taken part in the annual charity ride and everyone appeared to have enjoyed the experience, despite their aching legs.

Bisset DSc

Dr N.G. Bisset, Reader in Pharmacognosy at Chelsea College, University of London, has been awarded a DSc of the University. The award was made in recognition of Dr Bisset's research in phytochemistry.



Swinging into the final of the Numark chemist golf tournament was the Northern Ireland team, whose qualifying round was held at Belvoir Park. Pharmacist Danny McKavanagh from Craigavon (third from left) won the round and will fight for the Rennie trophy along with Joe Fegan of Andersontown (left) who came second and third team member Numark wholesaler Tom Hutchinson of Haydock (second from left). Also pictured is Nicholas/Rennie's Danny Carroll.

Taken for a ride

Raymond Bellm, managing director of International Laboratories will be driving everyone round the bend on July 31 when his Listerine-sponsored car is unveiled for the Spice World endurance racing team. Guests on the occasion will be offered a trip round the Goodwood race track by Mr Bellm and his fellow driver Gordon Spice. Since the car came first in its class at Le Mans last month, they'd better hold on to their helmets.

Chemist coshed in £2,000 raid

A Coventry pharmacist lost £2,000 after being beaten over the head at his shop recently.

Tarjinder Dhamu has just entered his pharmacy in Ernesford Grange shopping centre with £2,000 in takings he had not been able to bank at the weekend in a briefcase.

Three people burst in behind Mr Dhamu, hit him over the head and took the briefcase with the money.

Mr Dhamu told C&D the experience had been very frightening. "It was all over in seconds", he said.

Fortunately Mr Dhamu was not badly injured "the bruises are beginning to go down now", he said.

Police at Fletchamstead Station, in Coventry had charged three people in connection with the incident on Wednesday as C&D went to Press. And they are still investigating the incident, a spokesman said.

APPOINTMENTS

Macarthys make moves

Macarthys are rearranging their management structure.

Mike Wheeler, MPS, formerly marketing manager, becomes an operations manager, as does Phil Cramp, MPS, who was previously depot manager at South Street, Romford. John Ranson, who was manager at Bristol, becomes manager of the new Harold Hill depot, and Jim McLeod (formerly at Cheltenham) takes over at Bristol.

In the sales and marketing department Eddie Masters, previously merchandising manager, becomes general sales manager; Ralph Gutteridge, who was merchandising executive, becomes promotions manager, and Adrian Browne, formerly marketing services manager, becomes product group manager.

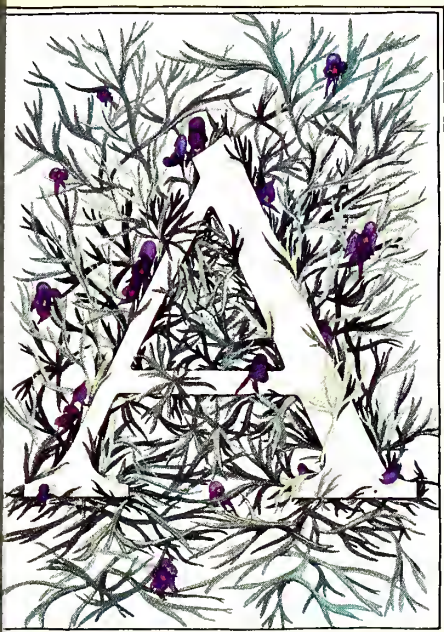
Dreamland appliances: John Harrison has been appointed area manager for the North West. Mr Harrison joins Dreamland after 14 years with Polygram.

Sangers Photographics: Peter T. Kett is appointed area sales manager for the Central and North London area. Mr Kett has recently been working as a professional photographer.

Doncaster Pharmaceuticals Group: Bill Kent, who joined the company in 1981, has been appointed sales manager to the group. Charles Henderson of Bathgate, Scotland, joins the group as Scottish representative.

Bristol-Myers: Heather Auton has been appointed marketing manager of the Bristol-Myers consumer division after eight years with the company. Mrs Auton started work as product manager in 1977 and has been group product manager for deodorants and marketing manager of Clairol.

Eschmann Healthcare: Mr Jef Lawrence has been appointed director/general manager, taking over from Paul Battersby, who held the post temporarily as managing director. Mr Lawrence has been with the company since 1982, as general manager of Eschmann Singapore and, on his return to the UK in 1983, as marketing manager for the equipment division.



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